



BOROUGH OF MORLEY

1968

annual report

Medical Officer of Health
GEOFFREY IRELAND, B.Sc., M.B., B.Ch., D.P.H.

Chief Public Health Inspector
E. C. LEWIS, M.R.S.H., M.A.P.H.I.



BOROUGH OF MORLEY

1968

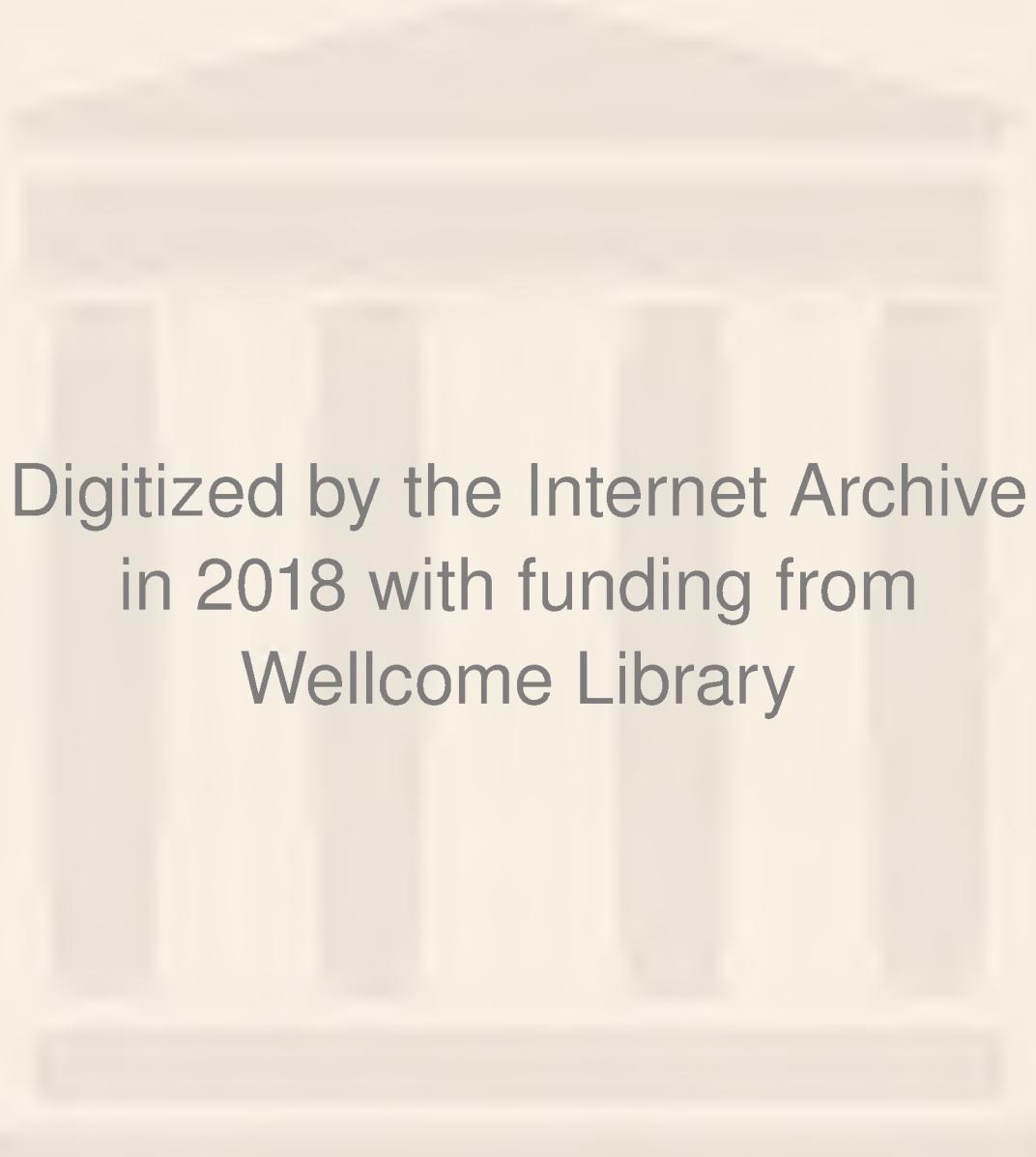
ANNUAL REPORT

MEDICAL OFFICER OF HEALTH

GEOFFREY IRELAND, B.Sc., M.B., B.Ch., D.P.H.

CHEIF PUBLIC HEALTH INSPECTOR

E. C. LEWIS, M.R.S.H., M.A.P.H.I.



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BOROUGH OF MORLEY
MEMBERS OF THE MORLEY BOROUGH HEALTH
COMMITTEE

1968-1969

The Mayor

Alderman A. R. Parker

Chairman

Alderman H. Leathley

Deputy Chairman

Councillor G. Toham

Aldermen

M. Davies

B. B. Barker

Miss C. E. Hepworth, J.P.

Councillors

D. Mills

F. Tighe

G. Teale

R. Parker

H. W. Nutter

Mrs. E. Thornton

F. E. Horsnail

D. Scargill

B. Haydn

Mrs. B. Green

Local Health Authority

West Riding County Council

BOROUGH OF MORLEY.

PUBLIC HEALTH STAFF

Medical Officer of Health.

and Divisional Medical Officer.

Geoffrey Ireland, B.Sc., M.B., B.Ch., D.P.H.

Deputy Medical Officer of Health.

and Senior Departmental Medical Officer.

Barbara Briggs, M.B., Ch.B., D.P.H

Public Health Inspector and Cleansing Superintendent

E. C. Lewis, M.R.S.H., M.A.P.H.I.

Deputy Chief Public Health Inspector.

R. S. Wright, M.A.P.H.I.

Additional Public Health Inspectors

K. R. Flint, M.A.P.H.I.

F. W. Hick, M.A.P.H.I.

S. G. Carden, M.A.P.H.I.

A. Blythe, M.A.P.H.I.

Student Public Health Inspector

R. Askew

Technical Assistant

J. Holmes

Cleansing Officer

G. Gregory.

Public Health Inspector's Clerks.

Mrs. M. Lewis.

Mrs. B. Thackray

Miss E. Speight

WEST RIDING COUNTY COUNCIL.

Departmental Medical Officers and School Medical Officers

Doreen M. M. Anderson, M.B., Ch.B. (Part-time).

Irene Hargreaves, M.B., Ch.B.

Teresa Rose, M.B., B.S., M.R.C.S., L.R.C.P.

School Dental Officers.

P. Smith, B.Ch.D., L.D.S.

B. G. Tetlow, L.D.S. (Part-time)

Divisional Nursing Officer.

Miss A. Hibbard, S.R.N., S.C.M., H.V. Certificate
Queen's Nurse.

Health Visitors and School Nurses.

Mrs. G. Cater, S.R.N., O.N.C., H.V. Certificate
Miss B. M. Chapman, S.R.N., S.C.M., H.V. Certificate
Mrs. E. K. Garbutt, S.R.N., S.C.M. (Part 1), H.V.
Certificate.
Miss D. M. Habergham, S.R.N., S.C.M. (Part 1).
H.V. Certificate.
Miss F. C. Hickey, S.R.N., S.C.M., H.V. Certificate
Mrs. V. F. Pickering, S.R.N., S.C.M., H.V. Certificate
Miss B. S. Smith, S.R.N., S.C.M., H.V. Certificate.
Mrs. A. M. O. Kenny, S.R.N., Assistant Health Visitor
Mrs. L. Newsome, S.R.N., Assistant Health Visitor,
Part-time
Mrs. J. Lawton, S.R.N., Assistant Health Visitor.
Part-time
Mrs. M. Collinson, S.R.N., Assistant Health Visitor,
Part-time

Home Nurses.

Mrs. J. Birkby, S.R.N., Q.N.
Mrs. M. Corness, S.R.N., Q.N.
Mrs. S. Dixon, S.R.N., Q.N.
Mrs. E. Newell, S.R.N., Q.N.
Mrs. C. Noble, S.R.N., Q.N.
Miss J. Stokes, S.R.N., Q.N.
Mrs. D. Harpin, S.R.N., Q.N. (Relief Nurse)

Midwives and Maternity Nurses

Mrs. M. Lewis, S.R.N., S.C.M. (Appointed 1.7.68)
Mrs. M. E. Noble, S.R.N., S.C.M. (Resigned 31.3.68)
Mrs. J. A. Stakes, S.R.N., S.C.M. (Resigned 30.11.68)
Mrs. M. McCutcheon, S.R.N. (Appointed 22.4.68)
Part-time
Miss A. Ingham, S.R.N., S.C.M. (Appointed 8.4.68)
Part-time

Senior Mental Welfare Officer.

A. Emmerson.

Mental Welfare Officers.

J. R. Marshall, R.N.M.S.
 H. H. Robinson, R.M.P.A., R.M.N., M.S.M.W.O.
 R. D. Stephens, R.M.N.

Junior Training Centre

Miss S. M. Thistlehwaite, N.A.M.H. Diploma
 Mrs. I. Ellis
 Mrs. M. E. Norman

Senior Training Centre—West Ardsley

Miss I. Beaumont, N.A.M.H. Diploma—Supervisor.
 Mrs. S. A. Bourne, N.A.M.H. Diploma.
 Mrs. P. M. Earnshaw, N.A.M.H. Diploma
 Mrs. K. M. Poyner, S.E.N.
 Mrs. E. Wright
 B. K. Brook, N.A.M.H. Diploma.
 M. Grange.

Healey Croft Residential Hostel—West Ardsley.

R. Tyson, S.R.N., R.M.N. — Warden.
 Mrs. M. Tyson, R.M.N.
 Mrs. L. Jarman.

Lee Grange Residential Hostel, West Ardsley.

D. H. Noble, R.M.N., R.G.N., Warden.
 Miss B. Ingham.

Child Guidance Service.

Dr. K. N. Maxwell, M.B., Ch.B.
 J. B. Mannix, M.Ed., Psychologist
 Mrs. J. M. Spurr, P.S.W.

Speech Therapist

Miss M. Kersner, L.C.S.T.

General Social Worker.

Mrs. S. Halstead, C.S.W.

Dental Attendants.

Miss M. Oldroyd
 Mrs. K. Ford (Part-time)

Chiropodists.

Miss D. E. Smith, M.Ch.S., S.R.Ch. (Part-time)
 L. Balmforth, L.Ch., S.R.Ch. (Part-time).
 Mrs. M. I. King, M.Ch.S., S.R.Ch. (Part-time)

Chief Clerk.

A. Wright, D.M.A., D.P.A.

Clerical Staff.

D. Leach (Deputy Chief Clerk)

A. C. Atack (Resigned 24.7.68).

P. M. Sheard.

Mrs. J. Anderson (Appointed 5.6.68).

Mrs. P. Baldwin (Appointed 2.9.68).

Miss C. Brennan (Retired 6.5.68).

Mrs. G. Burton*

Miss M. D. Cowling (Appointed 24.11.68).

Mrs. L. Crofton*

Mrs. G. N. Dable*

Mrs. A. Doidge (Appointed 9.9.68).

Miss M. Dunnett

Miss K. Edmondson.

Mrs. K. Graham.

Mrs. K. Marlow

Mrs. A. Renshaw

Miss J. Senior

Mrs. E. H. Thornber*

Mrs. M. M. Thornburn (Resigned 30.11.68).

Mrs. L. J. Wallis (Resigned 30.9.68).

*Part time.

LEEDS REGIONAL HOSPITAL BOARD

Consultant Staff.

Ear, Nose and Throat Surgeon.

H. Morus Jones, M.C., F.R.C.S., D.L.O.

Chest Physician

J. K. Scott, M.B., Ch.B., M.R.C.P., D.P.H

G. F. Edwards, M.B.E., M.B., B.S., M.R.C.S.,
M.R.C.P.

Ophthalmic Surgeon

L. Wittels, M.D. (Vienna), D.O. (Oxon.)

Paediatricians.

C. S. Livingstone, M.B., B.S., M.R.C.P., D.P.H.

Orthopaedic Surgeon.

Miss M A. Pearson, F.R.C.S.

Divisional Health Office,
Windsor House,
Queen Street,
Morley.

21st July, 1969.

To the Chairman and Members of the Morley Health Committee.

Mr. Chairman, Ladies and Gentlemen,

I have much pleasure in submitting my Annual Report for 1968.

This year I have made various modifications which I hope will be an improvement. In the past many of the tables were accompanied by text which though basically the same from year to year had to be modified annually according to the figures in the tables and it was detail such as this involving the four districts within the Division which made the production of the reports an onerous task. This year a great deal of this text has been omitted and any comment thought necessary has been made in this introduction. In addition, and in order to familiarise members with the work of individual officers and services within the Health Department, I have commenced a new section entitled "What is a". This year I have chosen the health visitor and outlined the nature of her work and duties. I hope this new layout will be acceptable.

From the vital statistics it will be seen that the birth rate has risen and there were 831 births in 1968 compared with 769 in the previous year. The death rate has also risen, there being 45 more deaths during the year, and further there was an increase of eight in the number of infant deaths under the age of twelve months though the stillbirths decreased by

two in number. Of the nine stillbirths and twelve infant deaths in the first week of life all were under the care of a hospital ante-natal clinic and all except two, which were precipitate premature deliveries, were born in hospital. There were 55 illegitimate births compared with 59 in 1967. I would draw your attention to the statistics on the cause of death and to the absence of figures for previous years. The reason is that the Registrar General has adopted a revised international classification of disease and the new shortened form used for these reports is not strictly comparable with that used in previous years. The comparison table therefore will be recommenced next year and continued in subsequent years. It will be seen from these statistics that heart disease caused 165 deaths, 122 of which were due specifically to coronary artery occlusion, cancer caused 89 deaths, 18 being due to cancer of the lung, cerebral haemorrhage and cerebral thrombosis 67 deaths and pneumonia, bronchitis and emphysema 68 deaths.

The Day and Night Nursing Service is a service which assists relatives in the nursing of members of their families at home—and in practice means that respite can be given to such relatives for one or two nights a week. The service however does not take over the total care of the patient. The number of cases requiring help in the Division was slightly greater in 1968 and at one time two cases had to be refused help because our only unqualified "sitter-in" was fully employed. Towards the end of the year the position improved when a qualified nurse joined the service. Two thirds of all the cases requiring help were in homes where patients were in the terminal stages of cancer.

The pattern of early discharge from hospital after confinement continues and the numbers discharged before the tenth day have increased considerably this year. We were in a slightly better position in 1968 as regards midwifery staff be-

cause of the employment of part-time midwives and part-time maternity nurses and we were able to cope with all the domiciliary demands on the service.

Routine vaccination against measles commenced in 1968 and 434 susceptible children have been protected in Morley. It is now theoretically possible to reduce measles to the position of diphtheria or poliomyelitis as regards the incidence of the disease in this country.

In the field of public health we have in the past dealt with problems of domestic water pollution. We are at present dealing with the problem of smoke pollution, but in the last 30 years a vast new technology has developed—a technology which is producing complex chemicals for medical, agricultural, industrial, domestic and military use and which can, and are producing a new form of environmental pollution. These chemical compounds which include insecticides, pesticides, rodenticides and nerve gases are producing problems in the environment because they have intense biological activity in small quantities. As this report is being written some 40 million fish have died in the Rhine probably poisoned by no more than 200lb. of insecticide. Some five years ago fluoroacetamide and sodium fluoroacetate, extremely effective rodenticides and pesticides were withdrawn from general sale following incidents in Wales and at Smarden in Kent where cows, cats and dogs died. At one time solutions containing these compounds could be bought quite freely over the counter for the control of garden pests. In 1968 some 6,000 sheep died in a valley in Utah in the United States of America when a nerve gas was accidentally released and which narrowly missed a crowded highway, and in a similar incident in Okinawa a few days ago 25 men had to be admitted to hospital. Flour made into bread has caused outbreaks of chemical food poisoning after contamination from the spillage of insecticide previously carried in the trucks. D.D.T. perhaps the most widely known of the insecticides,

is now so widespread that it can probably be detected in every living organism on earth. It was recently disclosed that the blood of the average American contained more D.D.T. than the health authorities permitted in meat, and the milk of the average mother contained a higher dose of D.D.T. than is permitted in milk for sale.

Despite these recorded incidents the management of chemical substances is often incredibly casual. The United States Army has just been dissuaded from carrying very large quantities of old nerve gas across America and dumping it into the Atlantic. Potent chemicals can still be purchased in this country for use in gardens with little guidance offered to the amateur gardener on their nature, and one does not have to travel far on our roads today before one comes up behind a tanker carrying a notice which states that the contents are dangerous. What is even more important however is that we are probably only at the beginning of this kind of technology and further developments in this field must automatically increase the risk of further environmental contamination if only from accidents or carelessness. However the potential danger is being recognised and the Secretary General of the United Nations has recently published a report which precedes a United Nations conference on this problem which is due to be held in 1972 and it is hoped that it will result in a code of practice which will be implemented by all the member nations.

May I take this opportunity to thank you Mr. Chairman and Members of the Health Committee for your support during the year. I should also like to thank Mr. Lewis for his co-operation and assistance, and lastly but by no means least my own staff, professional and clerical for their work, inside and outside normal hours, throughout the year.

GEOFFREY IRELAND,

Medical Officer of Health.

STATISTICS

Area	9,494 acres
Population—Census 1961	40,322
Registrar General's estimate of Resident Population mid 1968	43,960
Number of dwelling houses	16,388
Rateable Value (31.3.68)	£1,060,751
Product of penny rate (1967-68)	£4,060

Summary of Vital Statistics

	Total	M.	F.	
Live Births: Legitimate	776	419	357	Birth-rate per 1,000 of the estimated resident population 18.9
Illegitimate	55	30	25	
Still-Births: Legitimate	9	7	2	Rate per 1,000 (live and still-births) 10.7
Illegitimate	—	—	—	
Total Births: Legitimate	785	426	359	
Illegitimate	55	30	25	
Deaths	512	261	251	Death-rate per 1,000 of the estimated resident population 11.6

Maternal Mortality.

There were no maternal deaths during 1968.

Infant Mortality.

22 infants under the age of twelve months died during 1968 giving an infant mortality rate of 26.5 per 1,000 live births.

The following table gives the cause of death of these infants:—

Cause of Death	No. of infants dying in				
	1st week	2nd wk.	3rd wk.	4th wk.	5-52 weeks
Neo Natal Asphyxia ...	1	—	—	—	—
Gastro Enteritis	—	—	—	—	—
Treachers Collins Syndrome	1	—	—	—	1
Intra Pulmonary Haemorrhage	—	1	—	—	—
Prematurity	6	1	—	1	—
Broncho Pneumonia ...	1	—	—	—	2
Congenital Abnormality	2	—	—	1	2
Rt. subemendymal Haemorrhage	1	—	—	—	—
Accidental Death	—	—	—	—	1
Total ...	12	2	—	2	6

Infant Mortality Rate

Total infant deaths per 1,000 total live births	26.5
Legitimate infant deaths per 1,000 legitimate live births	25.7
Illegitimate infant deaths per 1,000 illegitimate live births	36.3

Neo Natal Mortality Rate

Deaths under four weeks per 1,000 total live births ...	16.8
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Early Neo-natal Mortality Rate.

Deaths under one week per 1,000 total live births ...	14.3
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Perinatal Mortality Rate.

Still births and deaths under one week combined per 1,000 live and still births	25.0
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CAUSE OF DEATH — MORLEY M.B.

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	Cause of Death	Males	Females	Total
B.5	Tuberculosis of respiratory system	1	1	2
B.6	Other Tuberculosis	1	—	1
B.19.1	Malignant Neoplasm — Stomach	3	6	9
B.19.2	Malignant Neoplasm — Lung, Bronchus	14	4	18
B.19.3	Malignant Neoplasm — Breast	—	6	6
B.19.4	Malignant Neoplasm — Uterus	—	5	5
B.19.5	Leukaemia	—	1	1
B.19.6	Other Malignant neoplasm	23	27	50
B.20	Benign and unspecified neoplasms	1	1	2
B.21	Diabetas Melitus	1	3	4
B.46.1	Other Endocrine, etc. diseases	—	1	1
B.23	Anaemias	—	1	1
B.46.4	Other diseases of nervous system, etc.	3	4	7
B.26	Chronic Rheumatic heart disease	1	3	4
B.27	Hypertensive disease	—	7	7
B.28	Ischaemic heart disease	1	1	2
B.29	Other forms of heart disease	71	17	122
B.30	Cerebral Vascular disease	25	42	67
B.46.5	Other diseases of circulatory system	9	10	19
B.32	Pneumonia	14	20	34
B.33.1	Bronchitis and emphysema	25	9	34
B.33.2	Asthma	1	2	3
B.46.6	Other diseases of respiratory system	8	2	10
B.34	Peptic Ulcer	2	—	2
B.36	Intestinal obstruction and hernia	—	2	2
B.37	Cirrhosis of liver	—	1	1
B.46.7	Other diseases of digestive system	2	3	5

CAUSE OF DEATH — MORLEY M.B. (Continued)

	Cause of Death		Males	Females	Total
B.38	Nephritis and Nephrosis		2	3	5
B.39	Hyperplasia of prostate		2	—	2
B.46.8	Other disease genito-urinary system		2	—	2
B.46.9	Diseases of skin, subcutaneous tissue		1	—	1
B.46.10	Diseases of muscular, Skeletal system		—	5	5
B.42	Congenital anomalies		8	1	9
B.43	Birth injury, difficult labour, etc.		1	2	3
B.44	Other causes of peri-natal mortality		6	1	7
B.45	Symptoms and ill defined conditions		—	3	3
BE.47	Motor vehicle accidents		8	1	9
BE.48	All other accidents		2	4	6
BE.49	Suicide and self inflicted injuries		3	5	8
B.E.50	All other external causes		2	1	3
Totals all causes		261	251	512	

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ANALYSIS OF DEATHS IN AGE GROUPS

	Under 1		1 — 4		5 — 14		15 — 24		25 — 34		35 — 44		45 — 54		55 — 64		65 — 74		75 & over	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
14	—	—	—	—	3	2	5	2	1	2	13	6	20	10	40	33	85	69	80	119

PRINCIPAL VITAL STATISTICS FOR THE YEAR 1968. COMPARISON WITH OTHER AREAS.
Based on the Registrar-General's figures.

	Morley M.B.	Ossett M.B.	Horbury U.D.	Wake- field R.D.	Aggregate West Riding Urban Dis.	West Riding Admin. Cty	England and Wales (Pro- visional Figs.)
Birth Rate (per 1,000 estimated population)	18.9	22.8	18.1	21.0	17.5	17.6	16.9
Death Rates (all per 1,000 estimated resident popu- lation).	11.6	9.9	12.3	8.8	12.3	11.6	11.9
All causes
Tuberculosis of respiratory system	0.05	0.06	0.0	0.0	0.0	0.03	0.03
Other forms of tuberculosis	0.02	0.0	0.0	0.0	0.0	0.02	0.01
Cancer	2.02	2.01	2.32	1.68	2.25	2.14	2.32
Cerebrovascular Disease	1.52	1.65	1.44	1.25	1.89	1.76	*
Heart & Circ. Diseases...	4.19	3.3	5.52	3.82	4.46	4.34	*
Respiratory disease (excl- uding tuberculosis of respiratory system) ...	1.80	1.53	1.99	1.03	1.74	1.66	*
Infant Mortality (deaths of infants under 1 year per 1,000 live births)	26.5	12.9	6.1	16.3	19.7	18.5	18.3
Maternal Mortality Rate (deaths of mothers due to pregnancy or child birth per 1,000 live and still births) ...	0.0	0.0	0.0	0.0	0.09	0.09	0.24
Still Birth Rate (per 1,000 live and still births) ...	10.7	10.2	0.0	12.1	14.4	14.3	14.3
Perinatal Mortality rate ...	25.0	12.8	0.0	22.2	25.8	25.0	24.7.
Neonatal Mortality rate ...	16.8	5.2	0.0	12.2	13.1	12.1	12.4

* Figures not available.

VITAL STATISTICS OVER THE TEN YEARS 1959-1968

Year	Birth Rate	Peri-natal Mortality Rate	Still Birth Rate	Death Rate	Maternal Mortality Rate	Cancer Death Rate	T.B. Death Rate		No. of cases of		No. of Deaths
							Pul-mo-	Diph-theria	Polio-myelitis	T.B.	
							nary	eria	myelitis	All forms	
1959	15.9	*	15.5	11.8	23.6	2.28	0.05	0.00	0	0	2
1960	16.4	43.9	30.7	12.4	25.6	2.21	0.00	0.00	0	0	20
1961	16.8	34.3	22.9	11.6	24.9	0.00	2.13	0.02	0.00	0	16
1962	18.8	29.2	12.7	11.7	28.3	0.00	2.05	0.07	0.00	0	3
1963	17.9	27.2	19.4	12.3	21.1	2.59	2.35	0.02	0.02	0	22
1964	20.2	27.5	14.9	11.2	19.8	0.00	2.51	0.05	0.02	0	3
1965	18.3	37.4	22.4	11.2	19.1	0.00	2.37	0.02	0.00	0	26
1966	17.7	27.0	9.0	12.3	22.0	0.00	2.14	0.02	0.00	0	1
1967	17.6	24.4	14.1	10.7	18.2	0.00	2.53	0.02	0.00	0	24
1968	18.9	25.0	10.7	11.6	26.5	0.00	2.02	0.05	0.02	0	20
											3
											18

* Figures not available.

INFECTIOUS DISEASES**Annual Notification 1964-1968**

Diseases	Year of Notification				
	1964	1965	1966	1967	1968
Scarlet Fever	23	41	17	15	7
Whooping Cough	18	7	26	4	9
Acute Poliomyelitis ...	—	—	—	—	—
Measles	359	324	217	98	492
Diphtheria	—	—	—	—	—
Dysentery	3	16	6	7	3
†Meningococcal Infection	—	—	—	—	—
†Acute Pneumonia ...	16	11	9	7	6
Smallpox	—	—	—	—	—
Acute Encephalitis	—	—	—	—	—
Typhoid Fever	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—
†Erysipelas	1	—	1	—	—
Food Poisoning	3	2	2	—	3
†Puerperal Pyrexia ...	—	1	—	—	1
Ophthalmia Neonatorum	—	—	—	—	—
Pulmonary Tuberculosis	6	3	5	6	9
Other forms of Tuberculosis	—	2	—	2	1
Malaria	—	—	—	—	—
Anthrax	—	—	—	—	—
Infective Jaundice ...	*	*	*	*	5

* Infective Jaundice became notifiable in June, 1968.

† To be deleted or amended from 1.10.68.

Under the Health Services and Public Health Act 1968 various changes in the notification of infectious diseases occurred as and from 1st October, 1968. These changes included the amendment or deletion of some diseases now notifiable and the addition of others. To avoid confusion the old list is shown above and will be amended where necessary in 1969.

TUBERCULOSIS

Cases requiring examination are referred to either the Chest Clinic at Dewsbury General Hospital, the Chest Clinic at 74 New Briggate, Leeds or the Chest Clinic at Pinderfields Hospital, Wakefield and regular home supervision is carried out by the Health Visitor. Free milk is provided by the County Council at the discretion of the Divisional Medical Officer if recommended by the Consultant Chest Physician in charge of the Clinic.

The following table gives the position regarding tuberculosis in Morley in 1968:—

	Respiratory			Non-Respiratory			Total
	M	F	Total	M	F	Total	
No. on register on 1st January, 1968	32	22	54	5	15	20	74
No. first notified during 1968	5	4	9	1	—	1	10
No. of cases entered in Register otherwise than by notification	—	—	—	—	—	—	—
No. of cases restored to Register	—	—	—	—	—	—	—
No. removed from Register during 1968							
(a) Died	2	—	2	—	—	—	2
(b) removed from district	—	—	—	—	—	—	—
(c) recovered	5	2	7	—	—	—	7
No. remaining on Register at 31st Dec., 1968	30	24	54	6	15	21	75

The number of new cases and the number of deaths notified during 1968 are given in detail in the following table:—

Age Period	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
0-4	—	—	—	—	—	—	—	—
5-14	—	—	—	—	—	—	—	—
15-24	2	—	—	—	—	—	—	—
25-44	—	1	—	—	—	—	—	—
45-64	1	2	1	—	—	—	—	—
65 and over ..	2	1	—	—	2	—	—	—
Totals	5	4	1	—	2	—	—	—

Miniature Mass Radiography

The Leeds Regional Hospital Board Mobile Unit visited Morley in 1968 and 1,645 persons were x-rayed. Two active cases of tuberculosis were discovered together with eight non-tuberculosis abnormalities.

WEST RIDING COUNTY COUNCIL HEALTH SERVICES LOCAL ADMINISTRATION

CHILD HEALTH CLINICS

Morley Central Clinic, Corporation Street
 Monday, 2-0 to 4-0 p.m.; Wednesday, 2-0 to 4-0 p.m.
 St. Michael's Sunday School, East Ardsley
 * Tuesday 2—4 p.m.
 Syke Road, West Ardsley. *Thursday 2—4 p.m.
 Old School Canteen, Drighlington. *Friday 2—4 p.m.
 Library and Community Centre, Gildersome.
 * Thursday 2—4 p.m.
 Mobile Clinic, Elland Road, Churwell
 Alternate Tuesdays 2-4 p.m.

MOTHER-CRAFT & RELAXATION CLASSES

Morley Central Clinic, Corporation Street,
 Friday 1-30—2-30 p.m.
 Library and Community Centre, Gildersome,
 Tuesday, 3 to 4 p.m.
 Syke Road, West Ardsley. Wednesday 2—3 p.m.

MIDWIVES' ANTE NATAL CLINIC

Morley Central Clinic, Corporation Street, Friday 2-4 p.m.

CERVICAL CYTOLOGY CLINIC

Morley Central Clinic, Corporation St., by appointment.

SPECIALIST SCHOOL CLINICS.

All these clinics are held at Morley Central Clinic,
 Corporation Street.
 Dental Clinic—Monday to Friday by appointment.
 Ophthalmic—As required by appointment.
 Speech Therapy Clinic—Thursday a.m. and p.m. by
 appointment.
 Child Guidance Clinic—Thursday 1-30 to 4 p.m.
 by appointment.

IMMUNISATION AND VACCINATION CLINICS

All Child Health Centres.

CHIROPODY

Morley Central Clinic, Corporation Street,
 Tuesday, Wednesday and Friday, 9 a.m.—12 noon by
 appointment. Friday 2—5 p.m.

Syke Road, West Ardsley, Alternate Thursday 9—12
 noon by appointment.

St. Michael's Schoolroom, East Ardsley, Alternate
 Mondays 2—5 p.m. by appointment.

Old School Canteen, Drighlington. Alternate Thursdays
 1—4 p.m. by appointment.

Library and Community Centre, Gildersome. Alternate
 Thursdays 9—12 noon by appointment.

* Combined with School Clinic Session

CLINICS

Child Health Clinics

Clinic	No. of Sessions	No. of children who attended and were born in		Total No. of attendances made by children born in		Average attendances per session
		1968	1963-67	1968	1963-67	
Central Clinic Corporation St., Morley	100	271	459	1226	1002	22
Community Centre, Gildersome	50	47	80	402	396	15
1 Syke Road, W. Ardsley	51	120	141	694	337	20
St. Michael's, Sunday School, E. Ardsley	48	59	137	343	383	15
Old School Canteen Drighlington	50	35	11	310	201	10
Mobile Clinic, Churwell	21	20	48	123	105	10
Total	320	552	876	3098	2424	17

Cervical Cytology Clinic

No. of Sessions held	No of patients attending	No of smears taken	No. with positive smears	No. of women referred to G.P. for breast tumours
33	435	427	2	—

The two positive cases were referred to Consultant Gynaecologists and, following further investigation, both had a hysterectomy performed.

Midwives' Ante-Natal Clinic.

The ante-natal clinic is attended by midwives who work in conjunction with the local general practitioner and is held between 3 and 4 p.m. immediately after the Relaxation Class.

Mothercraft and Relaxation Clinics

Clinic	No. of Sessions	Total No. of women who attended	Total Attendances	Average attendance
Central Clinic, Corporation Street, Morley	10	14	110	11

Due to an acute shortage of Midwives throughout the Division it was not possible to hold Relaxation Clinics throughout the year. The figures alone relate to the quarter ending 31st December, 1968 only.

Dental Clinic

Expectant and nursing mothers are referred from ante natal or child health clinics to the local health authority Dental Clinics or to a dentist practising under the National Health Service. Treatment, and this includes dentures, is free of charge provided it is completed one year after the birth of the baby. Mothers referred by a local Health Authority staff and inspected for treatment were 32 in the Division, but only 17 of these completed treatment.

Dental Inspection and Treatment—Morley.

No. of children inspected	2103
No. of children found to require treatment	1284
No. of children offered treatment	1284
No. of children treated	1217
No. of attendances	4140

Number of Extractions.

Temporary Teeth	1398
Permanent Teeth	544

Number of Fillings.

Temporary Teeth	109
Permanent Teeth	2661

Number of General Anaesthetics

643

Provision of Welfare Foods

Welfare cod liver oil, orange juice, vitamin A and D tablets, and National Dried Milk, are distributed at the Child Health Clinics, and some proprietary brands of milk and other infant foods are also sold at the Child Health Clinics for the convenience of mothers.

HOME NURSING

The County Council is responsible for the Home Nursing Service in Morley, the seven whole-time nurses being attached to the General Practitioners practices within the area.

Type of Patient under Care of Home Nurse in Morley during 1968

Classification	No. of individual patients attended	Total number of visits made
Medical	392	15731
Surgical	141	2436
Infectious Diseases	—	—
Tuberculosis	2	108
Maternity	15	141
Other Conditions	13	97
Total	563	18513

Day and Night Nursing Service

This service is an extension of the home nursing service and provides a day or night nursing service for a temporary

period, usually during the terminal stages of an illness. It is designed to relieve relations who may be near "breaking point". having cared for a patient at home for considerable time, and this service is very much appreciated by those relatives who have been under severe strain. Persons employed are trained nurses persons with nursing experience or sitters-in. The full cost of this scheme is met by the County Council. During the year nine patients in Morley received this service and a total of 789 hours of assistance was given, a sitter-in being employed on each occasion.

No. of cases and hours worked in Day and Night Nursing Service in the Division in 1968

Area	Cases			Hours		
	Cancer	Other Illness	Total Cases	Cancer	Other Illness	Total Hours
Ossett	2	1	3	120	12	132
Morley	7	2	9	490	299	789
Horbury	—	1	1	—	12	12
Wakefield Rural	1	1	2	286	84	370
Total ...	10	5	15	896	407	1303

MIDWIFERY

The following table shows the number of Morley women confined in hospital, private nursing home, or delivered by midwives and private practitioners in Morley and elsewhere.

Hospital and Domiciliary Confinements in 1968

Place of Delivery	No.	Percentage of total
Number delivered in Morley Hall ...	340	40.4 %
Number delivered in other hospitals	399	47.6 %
Number delivered in private nursing homes	—	0.0 %
Number delivered with midwife in attendance	101	12.0 %
Total (including still-births)	840	100 %

During 1968 the practising midwives did not summon medical assistance to any mother.

Early discharges of mothers from hospitals in the Division 1967-68

	1967	1968
Patients discharged after 48 hours (up to and including the 5th day)	200	233
Patients discharged at 48 hours	179	251
After the 5th day but before the 10th day...	159	210
Total ...	538	694

Close co-operation with the general practitioners has continued and in the division seven ante-natal clinics held in general practitioner's surgeries are attended by domiciliary midwives

Provision of Maternity Outfits.

These are provided free to mothers preparing for confinement in their own homes.

Analgesia.

All midwives are trained in the administration of trilene analgesia and are provided with the necessary equipment. Analgesia is available to all mothers desiring it, subject to satisfactory medical examination by a doctor, and during the year eighty-eight women received trilene.

Emergency Obstetric Unit.

The "flying squad" attached to the Staincliffe General Hospital, Dewsbury, is available for obstetric emergencies occurring within the district.

Care of Premature Infants.

Special equipment and nursing staff are available for use in the home in cases requiring them.

Survival of Premature Babies in Morley in 1968 (Domiciliary and Hospitals)

Weight at Birth	No. of Premature Babies		No. Dying within 28 days	No. Surviving 28 days
	Born Alive	Born Dead		
Under 2½ lb.	2	4	2	—
2½ to 3 lb.	3	—	3	—
3 to 3½ lb.	1	2	1	—
3½ to 4 lb.	5	—	1	4
4 to 4½ lb.	5	—	3	2
4½ to 5 lb.	10	1	—	10
5 to 5½ lb.	19	—	—	19
Total	45	7	10	35

Maternity Liaison

No invitations were received to Maternity Liaison Committees during the year.

HEALTH VISITING

Summary of Health Visitor's Home Visits in Morley in 1968

Children aged 0-5 years	
First visits	4101
Re-visits	6517
Total	10618
Persons aged 65 years and over:	
First visits	1133
Re-visits	1306
Total	2439
Visits to Home Help Cases	4196
Mental Health Visits	5
Visits to Hospital Discharges	52
Household Visits (T.B. and Infectious Diseases)	121
Other Visits	993

Phenylketonuria

The "Phenistix" test on all new born babies has continued in the Division and during the year 1,877 babies were tested either in Clinics or in the home. All children tested, except one, proved negative and thus free from a disease which, if not treated in the early weeks of life, can produce severe mental subnormality. The positive case which was from Ossett was confirmed on serum testing at the laboratory.

Congenital Dislocation of the Hip (Ortolani Test).

This test checks the hip abduction movement. A positive case, which indicates a congenital dislocation of the hip, must be referred promptly to an Orthopaedic Consultant for confirmation of diagnosis and early treatment should this be indicated, in order to avoid a prolonged treatment or a permanent handicap in later life. In the Division three babies were referred to a specialist during 1968 and all were confirmed as cases of congenital dislocation of the hip. One child was from Morley and two were from Ossett.

IMMUNISATION AND VACCINATION

In accordance with the National Health Service Act immunisation against diphtheria, whooping cough and tetanus, and vaccination against smallpox and poliomyelitis may be done either at the clinic or by the Family Doctor.

The number of children in Morley Borough who completed a primary course of immunisation or vaccination in 1968 was as follows:—

Type of Immunisation or vaccination	Year of Birth					Others under Age 16	Total
	1968	1967	1966	1965	1961-64		
Diphtheria	180	253	13	6	71	22	545
Whooping Cough	177	253	12	5	8	—	455
Tetanus	180	21	13	6	73	37	330
Poliomyelitis	178	287	25	11	91	30	622
Measles	—	44	58	49	283	7	434

The reason for the apparently poor response for primary protection this year is due to the fact that the immunisation and vaccination schedules were altered at the beginning of 1968. Under the previous schedule protection was commenced at about 3 months and occurred at monthly intervals until three doses had been given, with boosters at 18 months and at school entry. With the new schedule recommended by the then Ministry of Health protection is now given at six months, eight months, and fourteen months with a booster at school entry. Measles vaccination is offered at sixteen months and smallpox vaccination at eighteen months. The introduction of this new schedule has, therefore, postponed completion of primary protection by many months and accounts for the low returns this year.

The number of children in Morley Borough who received re-inforcing doses during 1968 was as follows:—

Type of Immunisation or Vaccination	Year of Birth					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
Diphtheria	—	208	236	3	468	598	1513
Whooping Cough	—	204	234	3	13	2	456
Tetanus	—	208	236	5	462	583	1494
Poliomyelitis	—	189	178	1	428	353	1149

Vaccination against Smallpox.

During the year 99 people were vaccinated against smallpox and eight people were re-vaccinated.

HOME HELPS

In accordance with the National Health Service Act, the County Council provide domestic help for householders "where such help is required owing to the presence of any person who is ill, lying in, an expectant mother, mentally defective, aged, or a child not over compulsory school age".

Home Helps were provided in Morley in 1968 for the following reasons:—

	Cases	Hours
Maternity	4	138
Chronic Sick and Tuberculosis	609	73878
Others	7	736
Total ...	620	74752

The service continues to expand and there were 6120 cases attended by the home helps during 1968 compared with 538 in the previous year, and the total number of hours worked was 74,752. This is 7,366 more than in 1967.

CHIROPODY

Regular sessions are held at clinics in the area and domiciliary visits can be arranged where the patient is certified to be medically unfit to attend the clinic. Details of the cases treated throughout the year are given below:—

Clinic	Sessions held	No. of Patients Treated			Total Treatments Given			
		A	PH	EM	Total	A	PH	EM
Central Clinic, Morley	233	379	8	—	387	1905	44	—
1 Syke Road, West Ardsley ...	18	33	3	—	36	136	16	—
St. Michael's Sunday School, East Ardsley ...	47	76	2	—	78	393	10	—
Old School Canteen, Drighlington ...	22	41	—	—	41	178	—	—
Com. Centre, Gildersome	35	57	4	—	61	279	12	—
Total	355	586	17	—	603	2891	82	—
Domiciliary Treatments	—	—	194	13	—	207	1222	124
Grand Total ...	—	780	30	—	810	4113	206	—

A — Aged

PH — Physically Handicapped.

EM — Expectant Mothers.

The Chiropody Service is limited to expectant mothers, men and women of pensionable age and of those of any age who are physically handicapped. Treatment is free but each person is normally limited to a maximum of six clinic or domiciliary visits in any period of twelve months.

CO-ORDINATING COMMITTEE ON PROBLEM FAMILIES

Many statutory and voluntary organisations are concerned with the rehabilitation of problem families. In order to bring together, for each of these families the knowledge and activities of the organisation concerned, representatives meet quarterly in Morley Town Hall under the chairmanship of the Medical Officer of Health. A total of twenty-seven cases from Morley M.B. have been discussed at the meetings during 1968.

NURSERIES AND CHILD MINDERS REGULATIONS ACT 1948

This Regulation Act was amended during the year by the Health Services and Public Health Act 1968 but the amendment did not become operative in the West Riding until early in 1969. Under this Act the County Council is authorised to grant or refuse registration of both nurseries and child minders. Several enquiries for registration have been investigated but no nursery or child minder has been registered during the year in Morley. Five Playgroups, though not requiring to be officially registered under the Act, have received unofficial inspection by the Health Department.

WARDEN SCHEME FOR THE ELDERLY LIVING IN PRIVATELY OWNED HOUSES

The service is provided primarily for those elderly persons who, while they are able to live normally in their own homes and look after themselves, may from time to time need help and guidance and a friendly oversight from someone who can readily be contacted.

A Warden is not normally required to provide physical help but occasionally additional duties such as shopping, taking prescriptions to the chemists and lighting fires may be necessary. The basic responsibility is to ensure that any service required by an elderly person is sought as soon as possible, whether this be medical, nursing, domestic, social or financial and problems

other than medical are referred to the Health Visitor working with the patient's General Practitioner.

Wardens are provided with telephones and have available the telephone number of all appropriate agencies whether statutory or voluntary. Where necessary, contact by telephone can also be made with relatives of elderly persons in situations of emergency. Wardens in most cases are housewives with normal household commitments. Their primary object is to establish a friendly contact and mutual understanding with those whom they give oversight.

In order to maintain reasonable contact the warden carries out a morning round of visits to ensure that any requirements of individuals in the group are being met. There is concentration upon those persons for the time being in need of more help than others. In most instances the duration of a visit need not be lengthy, and no calls are made on Sundays or Bank Holidays.

The Scheme was commenced in May 1968 with two wardens and was then extended to thirteen wardens by the end of the year. It is intended to have 16 wardens by March 1969.

Warden	Area	No. on Visiting List at 31st December, 1968
Mrs. Scarth	Britannia Road	20
Mrs. Wright	Churwell	19
Mrs. Mason	Drighlington	11
Mrs. Hullock	Dartmouth	13
Mrs. Hutchinson	East Ardsley	20
Mrs. Cannings	The Falls	19
Mrs. Stokell	Fountain Street	20
Mrs. Pitts	Gildersome	11
Mrs. Waterhouse	Gildersome	7
Mrs. Robertshaw	Lewisham Park	14
Mrs. Partington	Victoria Road	26
Mrs. Woollin	West Ardsley	17
Mrs. Marsden	Wide Lane	18
		—
		215

WHAT IS A HEALTH VISITOR ?

The National Health Service Act 1946 makes it obligatory upon local Health Authorities to provide health visitors "for visiting persons in their homes for the purposes of giving advice as to the care of young children, persons suffering from illness and expectant or nursing mothers, and as to the measures necessary to prevent the spread of infection". A health visitor is a State Registered Nurse with some experience in midwifery but not necessarily a State Certified Midwife. In addition she holds the Health Visitors' Certificate which is obtained after one academic year of full-time training.

Much of the health visitors time is devoted to maternity and child health work, i.e. the care of expectant and nursing mothers and the child under the age of 5 years but she also has other duties in the school health service and the control of notifiable diseases and verminous conditions. As a social worker, teacher, advisor and a link between the medical and social services the health visitor plays an important part in the personal health services provided by local Health Authorities. In 1956 the findings of an "Inquiry into Health Visiting" were published and among its many recommendations were the following: the primary function of the health visitor is to provide social advice and health education for the family. While recognising the important relationship to the mother and child the health visitor must extend her responsibilities to deal with the aged and the mentally subnormal and to give some advice in the case of mental illness, including child guidance. She should be prepared to assist disabled persons and handicapped children, and the care of tuberculosis persons should fit in with her preventive outlook. In all her work, she must be closely associated with the general practitioner but also co-operate with the hospital medical social workers and with the other field workers of the local Health Authority—midwives, home nurses and public health inspectors.

The health visitor's duty begins with the notification of the birth of a child by a midwife which is received by the Medical Officer of Health within thirty-six hours of the birth unless the confinement occurred outside the normal area of domicile when it becomes a transferable birth notification between medical officers of health and in such cases may not be received until 3—4 days have elapsed. Usually the health visitor visits the infant at home as soon as the midwife ceases to attend and until the Health Services and Public Health Act 1968 the period of 10 days after birth was considered to be the sole perogative of the

midwife. However whereas the midwife is statutorily still bound to attend during this lying-in period the health visitor can now also attend during this period if required.

At the first visit the health visitor completes her own record card and obtains the parent's consent for immunisation and vaccination which is returned to the Divisional Office for onward transfer to Wakefield. This information is passed to the West Riding computer and in due course results in appointments being issued either for attendance at a clinic or at the general practitioners surgery (if he is participating in the computer scheme). The choice of whether the protection is given at the clinic or by the family doctor is that of the parent. The first screening test is performed at this time and this test checks the hip movements to exclude any congenital dislocation. A positive case is referred through the general practitioner to an Orthopaedic Surgeon for confirmation of diagnosis and early treatment should this be indicated. Such early ascertainment avoids prolonged treatment or even permanent handicap in later life. At this visit the health visitor offers the mother an application form for an appointment at the Cervical Cytology clinic provided, of course, if it was a hospital confinement, no arrangements for such an examination have been made by the hospital at the post-natal examination.

It is expected that the health visitor will make periodic visits to the home during the first year and at less frequent intervals during the subsequent four years of pre-school life. A visit is made at 4 weeks when the phenylketonuria test is performed. This is a urine test using a prepared reagent strip of paper, and when dipped into a fresh specimen of urine or pressed on a wet napkin changes colour in positive cases and indicates that the child has a serious metabolic condition which unless adequately treated could lead to the development of severe mental sub-normality. This is not a common condition and occurs in about 1 in 10,000 births and since 1960 when testing first began in the West Riding 3 cases have been detected in this Division all of which so far have been successfully treated. Consideration is being given to the use of an improved test which requires a drop of blood on a filter paper and can be obtained relatively easily from a small skin prick on the heel. The problem at the present time, however, is the fact that the undertaking of this test requires laboratory facilities and the adequacy of these are at present under discussion.

Another important occasion when the health visitor will see the infant is between six and nine months when the first hearing test is performed. This test requires the presence of two nurses and as far as possible is undertaken in the clinic where the facilities are usually better than in the home. Appointments for this test are also supplied by the computer and all children who either fail to attend for testing or fail the test are followed up by means of the computer which sends out appointments at 18 months, 30 months and 4½ years. The information which is fed back to the computer will eventually contain a diagnosis if the child is deaf and a list of such children in the West Riding will be built-up. As a result of this testing early ascertainment of a deaf or partially hearing child is made and this means that treatment followed by arrangements for the pre-school training and education can be undertaken at an early age.

The health visitor will also see a large number of the children of the practice or practices to which she is attached at the Child Health Clinic. In the past such clinics were dominated by the weighing scales and any advice that was given to the mother was usually tendered when the baby was being weighed (which occurred in some cases on a weekly basis). It is now recognised that such regular weighing gives, at the best, only a crude indication of the progress of any child and in this division we have now turned towards regular assessments of development which in the first year of life takes place at one, three, six, nine and twelve months of age. These assessments are performed by the health visitor according to the prescribed list of tests for the age of the child and the results she obtains together with her intuition and any other information from other sources such as hospital and family doctor help her to decide whether she should refer the child for a full assessment by the clinic doctor who is now beginning to adopt an appointment system at the clinic. All children when they attend a Child Health Clinic for the first time are given an appointment to see the clinic doctor for a full medical examination and if this examination is normal all subsequent assessments can be related back to this original report when the question of slow or poor progress is raised. The purpose is to detect those children who may require assistance in the future because of a handicap—particularly in the field of education—and to institute or initiate as and when necessary any remedial measures including referral to the appropriate specialist through the family doctor and in some cases attendance at a special

school or centre when the appropriate age is reached. Such methods which detect handicapped children early in their life enable the Education Department to plan ahead as regards special educational facilities. The deaf test already mentioned is, of course, an integral part of this procedure and is mentioned separately only because it is a scheme practised throughout the country whereas assessment testing in the general sense varies from one divisional area to the next. It is proposed to continue with developmental testing in this Division between the ages of one and four years but at less frequent intervals than during the first year.

Health education is also the responsibility of the health visitor and this she practices by personal contact with individual mothers and also by group contact in the clinics when she can arrange talks, discussions and filmshows on health topics inside and outside the clinic. In this respect health visitors are entering both Junior and Secondary Schools where they give a planned series of talks to the pupils at the request of the Head teacher.

The health visitor is directly concerned with the immunisation and vaccination programme both from an educational point of view and practically as in addition to explaining to parents of the reasons for protecting their child she also administers injections, etc., as part of her duties in the clinic. She is able to offer protection against diphtheria, whooping cough, tetanus, poliomyelitis and measles but she does not vaccinate against smallpox, however, and this is still undertaken by the clinic doctor or general practitioner.

In spite of all this rather specialised work one must not lose sight of the fact that the health visitor serves in an advisory capacity and mothers and others with problems can approach her either in or out of the clinic for advice. In this respect she is no longer professionally isolated as all health visitors in this Division are attached to general practitioners which means that she undertakes her duties for the particular patients on a doctor's list rather than for a geographical area. This now gives her direct access to the respective general practitioners with whom she can discuss individual patients and if necessary ask for a medical opinion. This, of course, is a two-way process and the general practitioner will discuss his patients with the health visitor and ask for her opinion. The attachment scheme has worked quite well and liaison between the majority of general practitioners and the health department

has never been so good. Surveys on recent attachment schemes have indicated that no fundamental change occurs in the content of work by the health visitor as a result of attachment and that closer co-operation might well lead to an improved service in the future.

There are many other duties which concern the health visitor. She is responsible for the assessment of the need for a home help and the subsequent follow-up which takes up a good deal of her time—so much so in fact that assistant health visitors have recently been employed to undertake the routine part of this and other work. She is responsible for the assessment of domestic circumstances for hospitals in cases where application for a hospital bed has been made for an elderly person, the assessment of housing circumstances when an application has been made for rehousing on medical grounds, and the investigation of cases of infectious disease in conjunction with the public health inspector when she is able to offer advice to the householder on personal and domestic hygiene. In some cases the health visitor liaises with the paediatrician or the geriatrician in the hospital and is concerned principally with discharges from hospital and their aftercare. The health visitor in most authorities is also the school nurse and she has allocated to her a number of schools which are her responsibility as regards hygiene examinations, vision testing, hearing testing, colour vision testing, health education and assisting at medical examinations. As with the home help service assistant health visitors have been employed to help with these duties, but always under the day-to-day supervision of a health visitor.

All this is more or less routine work—but those who have some dealings with social work will know that a particular problem can occupy a day, two days or even a week. May I illustrate this with the case of Family W. This family consisted of a husband aged 63 and his wife aged 66. There were no children. This couple had lived in a small house for a number of years and had had no cause to see their doctor for at least 15 years. Information came to the department from the rent collector that all was not well at this house and some assistance might be required. The health visitor called on several occasions but could not gain admission. She learned from neighbours that the husband left for work about 8.0 a.m. and returned at variable times in the evenings. There was a question of some degree of subnormality and this was related more to the wife than the husband and because of this she enlisted

the help of the mental welfare officer. On the fourth visit to the house the wife opened the door and let them in and in the gloom and grime of the living room they found little food, no cooking facilities, a broken sink and the electrical system in a hazardous condition. The house had not been cleansed in a good many years and what bed linen was in use on the bed was in a filthy condition. None of the upstairs rooms were occupied and this couple had withdrawn to the two downstairs rooms, one of which contained the bed. The woman herself was clearly neglected and unwell and possibly suffering from a senile psychosis. It was obvious that further action was required as a matter of some urgency and at 10-0 a.m. the following morning the house was visited by the general practitioner, medical officer of health, public health inspector, health visitor and mental welfare officer. The wife was examined by the general practitioner and as a result arrangements were made for immediate hospital admission. The public health inspector arranged to clean out all the accumulated rubbish and the health visitor assembled what clean linen etc. she could find. All this was with the co-operation of Mr. W who seemed pleased that such assistance had seemingly materialised out of the blue. Once the rubbish was moved the health visitor arranged for the attendance of two home helps to clean out the house and followed this by obtaining wallpaper and arranging for pupils at a local school to decorate the two downstairs rooms. Second-hand furniture and a cooker was obtained from various sources and the sink and electrical system attended to by the landlord. It would be pleasant to record that Mrs W returned home after treatment but so far her condition has not improved sufficiently for this to take place.

All this took time—it took a great deal of time and had to be fitted in with the normal routine tasks of health visiting.

There is no doubt that the health visitor with her medico-social approach to problems is unique in the field of social work. Few would disagree that many medical conditions have related social problems or conversely that many social problems have an associated medical condition and therefore of all the social workers present or future there are none who can fulfill the role of advisor to the family more completely than the health visitor.

**WEST RIDING COUNTY COUNCIL HEALTH SERVICES
DIVISIONAL ADMINISTRATION
HEALTH EDUCATION**

Health education activities have continued to be carried out by health visitors during their visits to homes, clinics and schools. In the latter case the activities have been extended to include Grammar School and three Junior Schools. Of the two Grammar Schools and six Secondary Schools in the Division only one of the former and one of the latter are not included in the Health Education Programme. The health education activities appear to be well liked by the pupils who are encouraged to take an active part and they frequently enter into lively discussion with the health visitor concerned.

Poster displays are put up in local clinics, general practitioner's surgeries, libraries and other sites, and leaflets and bookmarks are used where appropriate. The topics used in 1968 were as follows:—

- Children need toys
- Care for your feet
- What to eat and why
- Gardening hazards
- Poisonous berries and fungi
- Home Safety
- Bonfire hazards
- Good teeth are top gear
- Buy safe for Christmas

The main event of 1968 was the Home Safety Exhibition at Morley Town Hall from the 8th to the 12th October, coupled with the Hazard House which was opened in a house adjoining the Town Hall. The North Eastern Gas Board, Yorkshire Electricity Board, Fire Service, West Riding Health Education Section in addition to the Morley Health Department were all contributors, and help in various forms was received from two Departmental Stores. The Hazard House itself attracted the notice of Yorkshire Television and resulted in a ten minute 'spot' on 'Look North' during the early evening of the Opening Day. The complete Exhibition was open for five days and resulted in the following attendance figures:—

Hazard House	Exhibition	Total
2,352	2,312	4,664

There is no doubt that this was a successful venture and a letter received from the Organiser—Home Safety, Northern Region of the Royal Society for the Prevention of Accidents stated that he was very impressed with the Exhibition and went on to say "I think it was one of the best mounted Exhibitions I have seen in the area: in fact I would go, I think, as far as saying, it is one of the best I have seen in the whole of the North of England".

THE UNMARRIED MOTHER AND MOTHER AND BABY HOMES

The unmarried mother is referred usually by the Moral Welfare Organisation, our own staff or other services. Should the unmarried mother require a place in a Home prior and after delivery of her baby this can be arranged and financial responsibility is undertaken by the County Council provided she is a bona fide resident of the West Riding. The mother enters the Home during the later period of her pregnancy, is admitted to hospital for her confinement and returns to the Home for a further few weeks after the birth of her baby. Nineteen such cases were accommodated in Mother and Baby Homes during the year.

Of the total of 109 live illegitimate births, 65 were dealt with in this Division as indicated below:—

	West Riding Cases	Non- County Cases	Total
1. No. of cases dealt with during the year			
(a) Referred by Moral Welfare Organisations	7	—	7
(b) Ascertained through own staff (midwives, etc.)	30	—	30
(c) Referred by other services	28	—	28
TOTALS ...	65	—	65

	West Riding Cases	Non- County Cases	Total
2. Analysis:—			
(a) Married* (i) with previous illegitimate children	3	—	3
(ii) Without previous illegitimate children	11	—	11
(b) Single (i) with previous illegitimate children	6	—	6
(ii) without previous illegitimate children ...	43	—	43
(c) Widowed or Divorced			
(i) with previous illegitimate children	—	—	—
(ii) without previous illegitimate children ..	2	—	2
TOTALS ...	65	—	65

*For the purpose of the scheme, a married mother of an illegitimate child is included, when known as such, as an unmarried mother.

	West Riding Cases	Non- County Cases	Total
3. Ages:—			
(a) Under 15	—	—	—
(b) 15—19	24	—	24
(c) 20—24	25	—	25
(d) 25—29	11	—	11
(e) 30—39	4	—	4
(f) 40 and over	1	—	1
TOTALS ...	65	—	65

	West Riding Cases	Non- County Cases	Total
4. Disposal :—			
(a) Cases settled :—			
(i) Marriage	2	—	2
(ii) Baby died	1	—	1
(iii) Grandparents to take baby home	3	—	3
(iv) Baby adopted	9	—	9
(v) Baby fostered	1	—	1
(vi) Mother keeping baby	49	—	49
(b) Cases referred else- where	—	—	—
(c) Cases in which action has been taken but not finally settled	—	—	—
TOTALS ...	65	—	65

CARE AND AFTER-CARE

Recuperative Home Treatment

Ten patients were sent to various convalescent homes from this Division during the year following the medical recommendation from the family doctor. Applications are only considered where the patient is recovering from an illness and when it is likely that a period in a convalescent home would hasten recovery.

Provision of Nursing Equipment in the Home

1,165 items of nursing equipment were issued to patients being nursed in their own homes. Such equipment included commodes, bed pans, rubber sheets and wheelchairs. The latter are for temporary use only as chairs for permanent use are supplied by the Ministry of Pensions through the hospital service.

Incontinent Patients

A laundry service for these patients is available in Morley Borough where arrangements can be made for the soiled linen to be collected and taken to Dewsbury General Hospital for washing. This service has been largely superseded by the use of disposable pads. These pads are more comfortable to the patient, can be changed more frequently than bed linen and are therefore much more convenient.

Hospital Liaison

Four health visitors are engaged in hospital liaison work, two undertaking premature baby liaison at Wakefield General Hospital, Manygates Maternity Hospital and Leeds Maternity Hospital, one carrying out geriatric liaison with Headlands Hospital, Pontefract, and one diabetic liaison with Clayton Hospital, Wakefield.

Premature Baby Liaison

This takes place at Manygates Hospital and Wakefield General Hospital. The Health Visitor visits weekly and obtains environment reports for the Paediatricians and notifies the Divisions of the pending discharge of a premature baby. The Health Visitor also attends a follow-up clinic at Manygates Hospital.

Diabetic Liaison

The Health Visitor attends Dr. Fletcher's Diabetic Clinic every Monday at Clayton Hospital. She does follow-up visits to diabetic patients in her own area and refers patients together with detailed instructions regarding diet and insulin therapy to the health visitor responsible for the patients seen from other Divisions.

Geriatric Liaison

Geriatric Liaison work at the beginning of the year consisted of social reports and discharge rounds at the General Hospital Wakefield and Headlands, Pontefract.

The majority of patients from Division 13 are admitted to the General Hospital, Wakefield and Staincliffe Hospital, Dewsbury. A few cases requiring active treatment only are admitted to St. James' Hospital, Leeds.

MENTAL HEALTH

Mental Welfare Officers

There are three Mental Welfare Officers in the Division who are concerned with the pre-care and after-care of mentally disordered persons and with the admission of such persons to hospital when this becomes necessary. A twenty-four hour admission service is operated.

Psychiatric Social Club

This Club meets every week at Morley Central Clinic on Thursday evenings at 7-30 p.m. About 15 out of a possible 25 members turn up at the Club evenings and the mental welfare officers help in the arrangement of activities. The purpose of the club is to assist in the social re-integration of patients discharged from hospital and to serve as a link between hospital and domiciliary services. It is essentially a friendly group where members can meet others who, if they do not have their problems at least understand them.

Ossett Junior Training Centre

The year started with 23 children on the register, three children were admitted and four left such that at the 31st December, 1968, 22 children were in attendance. Of the four discharges, two were transferred to the West Ardsley Centre on attaining the age of 11 years, one was admitted to a school for educationally subnormal pupils and one child left the area.

Age and Sex of Children in Attendance at Ossett Training Centre at 31st December, 1968

Sex	AGE							Total
	4+	5+	6+	7+	8+	9+	10+	
<u>Male</u>	1	2	—	5	2	3	1	14
<u>Female</u>	2	—	—	—	4	2	—	8
<u>Total ..</u>	3	2	—	5	6	5	1	22

West Ardsley Training Centre

There were 84 trainees in attendance at the Centre at the end of 1968, with the ages ranging from 6 to 52 years.

Age and Sex of Children in Attendance at West Ardsley Training Centre at the 31st December, 1968

Section	J U N I O R W I N G										Adult					Special Care Unit	Total	
	Junior Group					Transitional					40+			Various Ages				
Age	5+	6+	7+	8+	9+	10+	11+	12+	13+	14+	15+	16+	20+	30+	40+			
Male	—	1	3	—	—	—	—	1	2	2	—	—	6	10	2	2	36	
Female	—	1	1	2	—	—	—	—	—	—	—	1	7	11	9	6	48	
Totals	—	—	2	4	2	—	—	3	4	1	1	1	13	21	11	14	6	
Places												4	M.26 F.33			6	84	
												15				12	76	
													M.23	F.23		6		

Seventeen persons were admitted during the year including four children under the age of sixteen and 13 adults, eleven of whom resided at Healey Croft Hostel. One of the children was admitted to the Special Care Unit.

There were 20 discharges in the same period, three children under the age of sixteen years, one of whom was transferred to a school for educationally subnormal pupils, and 17 adults, nine of whom obtained work in open industry.

Internally two boys and two girls were transferred from the Junior Wing to the Adult Department.

Healey Croft Hostel.

Healey Croft, completed in 1965, has places for 30 subnormal adults 15 male and 15 female. There were ten admissions during the year summarised as follows:

Short stay admissions	4
Admission from hospital	1
Admission from County Children's Home	1
Admissions from community on social grounds	4

The eleven discharges which occurred during the same period are summarised as follows:—

Short stay admissions	5
Discharge to lodgings	3
Returned to former home	3

There was a waiting list of 10 potential residents at the end of the year.

Age and Sex of Residents at Healey Croft at the 31st December, 1968

Sex	AGE								Total
	16+	19+	22+	25+	30+	40+	50+	60+	
Male	—	3	—	2	4	3	2	—	14
Female	—	6	—	—	3	4	2	—	15
Total .	—	9	—	2	7	7	4	—	29

By the end of the year 8 male and 4 female residents were in employment while the remainder attended West Ardsley Training Centre. Eleven residents admitted between August and December, 1965, and seven residents admitted between January and December, 1966, remain in residence at Healey Croft.

A house in Morley which had been adapted to take sub-normal adults as lodgers was opened during the year and a landlady was appointed. Three residents 1 male and two female were transferred from Healey Croft and settled in remarkably quickly.

Lee Grange Hostel.

Lee Grange opened in 1968 and has places for 20 adults, 10 male and 10 female, who are recovering from mental illness. The first resident was admitted on the 28th July and by the 31st December there had been 17 admissions and 8 discharges.

Age and Sex of Residents at Lee Grange at 31st December, 1968

Sex	16+	19+	22+	25+	30+	40+	50+	60+	Total
Male	—	—	—	—	1	1	3	—	5
Female	—	—	1	1	1	1	—	—	4
Total	—	—	1	1	2	2	3	—	9

This is a short stay hostel and its use must depend upon good liaison with the nearby hospitals in Wakefield, Leeds, Bradford and Huddersfield.

SCHOOL HEALTH SERVICE

Under the routine and selective scheme of medical examinations, 2,979 children were examined in 1968, and there were no children who were considered to have an unsatisfactory general physical condition.

SCHOOL POPULATION

	Morley	Ossett	Horbury	Wake-field Rural	Total
No. of departments ...	29	11	6	18	64
No. of children in attendance	6790	2871	1455	2994	14110
No. of children examined	1513	610	265	587	2975

The number of children examined on entering Infant schools and the number leaving Secondary Schools were as shown in the following table:—

ROUTINE SCHOOL INSPECTIONS

Group	Morley		Ossett		Horbury		WakefieldR		Total	
	Satis	unsatis	Satis	unsatis	Satis	unsatis	Satis	unsatis	Satis	unsatis
Entrants	709	—	324	—	139	—	349	—	1521	—
Leavers	486	—	222	—	102	—	158	—	968	—
Total	1195	—	546	—	241	—	507	—	2489	—

Children attending Junior Schools are covered by the non-routine Scheme, and the number of these children who were examined are shown under "Selective Examinations" in the following table:—

Type of Examination	Morley	Ossett	Horbury	Wake-field Rural	Total
Special examinations ...	563	135	67	154	919
Selective examinations .	318	64	24	80	486
Total	881	199	91	234	1405

Cleanliness

One hundred and thirty-five children were excluded from school, some on more than one occasion, during the year, because of head infestation and of these three children were compulsorily cleansed. This compares with 73 exclusions and 8 compulsory cleansings in 1967, though the percentage of infestation in the Division has risen to 1.7 in 1968 as against 1.5 in 1967.

The health visiting staff makes routine inspections to the schools and all cases of infestation are followed up with advice and supplies of shampoo for the affected child and where necessary for other members of the family.

CLEANLINESS INSPECTIONS

	Morley	Ossett	Horbury	Wake-field R	Total
No. of children examined	16111	6219	4012	6822	33164
No. of cases of infestation	375	108	6	68	557
% of infestation	2.3	1.7	0.14	0.9	1.6
No. of individual cases of infestation	192	70	6	30	298
No. of children excluded from school	129	6	—	—	135
No. of cleansing notices issued	38	—	—	—	38
No. of cleansing orders issued	6	—	—	—	6
No. of children compulsorily cleansed	3	—	—	—	3
Successful Legal Proceedings	—	—	—	—	—

Vision

All children with a visual acuity of 6/9 are kept under observation and those with less than this are referred for specialist examinations. The following table summarises the findings during the past year.

RESULTS OF VISION TEST

Age	No. Examined	Normal		Observation		Treatment	
		No.	%	No.	%	No.	%
7	512	485	94.7	15	2.9	12	2.3
9	1161	1055	90.8	67	5.7	39	3.3
11	917	835	91.0	38	4.1	44	4.7
13	1093	996	91.1	45	4.1	52	4.7
Total	3683	3371	91.5	165	4.4	147	3.9

A colour vision screening test is undertaken at 11 years of age by means of the Ishihara Colour Plates. The shortened version is used by the health visitor and the test is repeated by the school medical officer using the complete set of plates when a child fails the first test. Colour vision is important when one is considering a future career as with certain occupations in the Royal Navy, Royal Air Force, Merchant Navy, Railways, G.P.O., Police, Pharmacy, Textile Manufacture, Electrical industries, Printing and Paint Trades, defective colour vision would be a bar to employment.

Hearing

Seven hundred and twenty-nine 7-year-old children had their hearing tested by audiometer as a routine, and 21 were referred to the school medical officer for further investigation. No child has been provided with a hearing aid during the year.

CLINIC AND CONSULTANT SERVICES

The Division is well served by neighbouring hospitals and hardly any delay occurs when a consultant's opinion is required. The Division has its own Psychiatrist, Psychologist and the services of several ophthalmologists on a sessional basis. In addition we have two speech therapists working on a part time basis.

Child Guidance Clinic

Child Guidance Clinics continue to be held at Ossett and Morley, each clinic having one weekly session. There is ample work at Ossett Clinic and no waiting list, new cases being seen at once. At Morley Clinic urgent cases can be seen at once; less urgent cases are offered a first appointment within two to four weeks. The Morley Clinic has the larger case load. All the correspondence of both clinics is dealt with at the Morley Clinic where secretarial assistance is provided,

Mr. J. B. Mannix, Psychologist, continues to work at both the Ossett and Morley Clinics. Mrs. Castle, Psychologist, has been appointed and will work temporarily in both clinics.

Following the resignation of Mrs. June Spurr, Psychiatric Social Worker, temporary assistance has been provided by Mrs. S. Halstead the newly appointed Social Worker.

CILDREN ATTENDING CHILD GUIDANCE CLINICS IN 1968

	Ossett	Morley
Number of sessions held	46	45
Number of new cases	24	32
Number of cases referred from 1967	19	40
Number of cases discharged or referred for residential treatment	20	36
Number of cases carried forward to 1969	23	36

Speech Therapy Clinic

This clinic was recommenced in September, 1967 after a lapse of two years, with two speech therapists working in the Morley and Gaskell parts of the Division respectively. They are both employed full-time by the West Riding County Council but as they have duties in other areas their whole time equivalent in this Division is equal to a half a therapist which is 50% of our present establishment. Thirty-seven cases were discharged from the clinic for reasons specified in the table, 113 cases were seen for treatment during the last few months of 1968.

1. Total number of sessions held during year	179
2. (a) No. of new cases treated during year	66
(b) No. of cases already attending for treatment from previous year	47
(c) Total number of cases treated (a + b)	113
3. No. of cases awaiting treatment at end of year	24
4. No. of visits made to school	3
5. No. of home visits	—

Analysis of Cases treated during year

	Boys	Girls
1. Stammering	11	9
2. Defects of articulation:—		
(a) Cleft Palate	—	1
(b) Cerebral Palsy	—	—
(c) Other structural malformations	4	1
(d) Other causes e.g. neurological	3	—
(e) No specific cause found	22	27
3. Disorders of Language due to:—		
(a) Retarded language development (non-specific)	14	—
(b) Retardation with associated subnormality	10	3
(c) Retardation associated with deafness	1	3
(d) Dysphasia	—	1
(e) Aphasia	1	—
(f) Other reasons	1	—
4. Dysphonia	—	—
5. Other defects	1	—

Children discharged during the year.

Total	20	17
Analysis.		
Speech normal	7	6
Speech improved	5	4
Unsuitable for treatment	1	—
Non Co-operation	2	3
Admitted to special schools	—	1
Left School	4	—
Left District	1	—
Other Reasons	—	3

Handicapped Pupils

Sixty-six children were initially ascertained during the year, and at the end of 1968 we had a total of 287 handicapped children on our register. Of these, 134 were already receiving appropriate education in special schools, but 19 physically handicapped children and 60 educationally sub-normal children remained to be placed in special schools. The remaining 74 children 6 of whom were physically handicapped were recommended for special educational treatment in the ordinary school. There is no doubt that there is a need for a remedial centre at which slow children (68 in the Division) who normally attend at the ordinary school, could visit, say for one day a week. At such a centre, educational therapeutic methods could be undertaken by experienced staff and would undoubtedly be of benefit to such border line educationally sub-normal children.

HANDICAPPED PUPILS RECOMMENDED FOR EDUCATION IN SPECIAL SCHOOLS AT 31st DECEMBER, 1968

Category	Morley	Gaskell	Total
Blind	1	—	1
Partially Sighted	1	4	5
Deaf	6	8	14
Partially Hearing	3	2	5
Educationally Subnormal	90	53	143
Physically Handicapped	9	13	22
Maladjusted	8	5	13
Delicate	3	6	9
Epileptic	—	1	1
Total	121	92	213

Pre-School Handicapped Children

Under the normal scheme congenital abnormalities are notified by the midwife on the birth notification card and in addition to this a card index is kept in the Divisional Health Office of all known children who are born with or develop a handicap either physical or mental which may be of such a degree as to necessitate special arrangements for the child's education. These children are closely supervised, frequently visited by the health visitor, and their reports are submitted to the relevant Departmental Medical Officer who will eventually come to a decision re the best possible arrangements for every particular child.

Children and Young Persons Act, 1933

67 children made special application to take part-time employment during the year and all were considered physically fit for such work.

GENERAL PROVISION OF HEALTH SERVICES

HOSPITALS

General Hospital Accommodation

There are no hospitals within the Borough of Morley but reasonably adequate facilities are available in Wakefield, Dewsbury and Leeds, under the administration of the Leeds Regional Hospital Board.

A new Regional Burns Centre built in the grounds of Pinderfields Hospital, Wakefield provides the most modern equipment and intensive specialist treatment designed to give severe burns cases the greatest possible chance of recovery.

Isolation Hospitals

Patients with infectious disease may be admitted to Snape-thorpe Hospital, Wakefield, or Seacroft Hospital, Leeds. The latter hospital admits all cases of acute poliomyelitis from this area.

Maternity Hospitals and Maternity Homes

Maternity hospital facilities are available at centres in Wakefield, Dewsbury and Leeds, and there is a maternity home in Morley. Priority is given to abnormal cases and to mothers living in conditions unsuitable for domiciliary confinement.

Hospitals Specialising in Mental Disorder

In addition to the Stanley Royd Hospital, Wakefield, Meanwood Park Hospital, Leeds and Westwood, Bradford, work has commenced on a new hospital for mentally sub-normal patients on a site adjacent to Pinderfields and Stanley Royd Hospitals, Wakefield. This hospital will have 480 beds of which 100 will be for children and 46 for adolescents. There will also be an "infirmary" unit for 20 beds for those sub-normal patients suffering from acute medical or surgical conditions. A rehabilitation unit will be provided and in order to facilitate the close liaison with the Local Health Authority Services, accommodation is to be provided for the mental welfare staff.

AMBULANCE SERVICE

The local ambulance service is provided by the West Riding County Council. All calls for the ambulance service should be made to the Ambulance Headquarters, Tel. No. Bradford 682211.

LABORATORY FACILITIES

The Public Health Laboratory at Wood Street, Wakefield (under the administration of the Medical Research Council of the Ministry of Health) accepts specimens for bacteriological, biological, entomological and chemical investigations from General Practitioners and Public Health Department Staff.

ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

To the Chairman and Members of the Health Committee.

Mr. Chairman, Ladies and Gentlemen.

I have pleasure in presenting my tenth Annual Report upon the environmental health of the Area for the year 1968. The main body of the report will give details of the work carried out by the Public Health Inspectors during the year and in addition to these details the following observations are submitted for your particular attention.

General Environmental Hygiene of the Area

The year under review saw progress made in practically every field of work as the staffing position improved and by the end of the year the department had again a full complement of inspectors.

Perhaps the main decision taken by the Health Committee during the year was to employ Work Study Consultants to look at the Cleansing Section of the department with a view to implementing an incentive bonus scheme for refuse collection based on work measurement to ensure a 5 day refuse collection service to all householders. The London Boroughs Management Services Unit commenced their work measurement of the Cleansing Section in August and this continued until the end of the year. The introduction of a regular refuse collection service will be welcomed by the Council, the ratepayers and the department and we can look forward to such a scheme being put into operation by the summer of 1969.

The service in the meantime although still unsatisfactory from the householders point of view, judged by continual complaints made to the office, showed an improvement on the previous year particularly during the month of August as the collection staff had agreed for the holiday period to be staggered and it was possible to provide a service during the Morley Feast holiday period.

The tip at Dewsbury Road was free from fires throughout the year as it was possible to obtain soil and inert material to cover the tip face and to this end, the assistance given to

us by the motorway contractors was most welcome. It was also possible to make regular inspections of the land adjoining the tip so that paper and celophane blown on to the land from the tip could be collected.

Concern was shown over the remaining life of the tip as it became apparent that with the amount of refuse now deposited on the tip, the estimated life of 20 years from 1956 would not be reached. The Health Committee during their Annual Inspection in July visited a number of sites, which appeared suitable for use as future tipping sites but none of the sites inspected leant itself for tipping purposes without considerable sums of money having to be expended for purchase, access or treatment before tipping could even commence.

Strong measures had to be taken against indiscriminate tipping and treatment of industrial waste by certain firms in the Borough. The main nuisance arose from severe emission of black smoke from tipping operations carried out in the Woodkirk area and eventually the court issued a Nuisance Order on the firm. Discussions took place with the firm and a Code of Practice relating to controlled tipping was submitted to them, which if adhered to, would go a long way in preventing a recurrence of the smoke nuisance. Legal proceedings were instituted against a firm engaged in car wrecking operations where again a severe smoke nuisance arose from time to time when cars and other vehicles were fired before being dismantled. As the firm was liable to further prosecutions in respect of offences which had taken place after the offence which became the subject of legal proceedings, a full discussion took place with the firm who agreed to cease firing the vehicles pending the exploration of other avenues for reaching the same objective. The Council agreed not to take any further prosecutions and eventually the firm devised and installed a vehicle crushing plant.

Complaints from residents in the Scotchman Lane area against the tipping of industrial waste in quarries at the rear of Scotchman Lane came to a head when the firm concerned dumped a number of closed containers containing spent cyanide on their land. Fortunately they were quickly discovered on a routine inspection of the area and a guard was maintained on the containers until they were removed by the firm. The Health Committee met the local representative of the firm at the quarries and steps were taken to minimise as far as possible, nuisance arising from the tipping operations.

Routine observations on Smoke Control Areas showed that a number of householders were using unauthorised fuel and whereas in the majority of cases, a warning letter was sufficient action to prevent further offences, some offenders persisted in burning coal and the Health Committee agreed that the only course of action remaining was to institute legal proceedings. Six offenders were subsequently prosecuted for offences under Section II of the Clean Air Act, 1956 and in each case the Magistrates imposed a fine.

Following a number of discussions which took place with officers of the West Riding County Council, Health Committee members and officers of both Batley and Morley Borough Councils to approve a suitable site for gypsy caravans, a site at Drighlington was approved in principle by the Working Party. There immediately followed strong protestations by the residents of the district in which the site was proposed and even from householders far removed from the site, and in view of the strong local opposition to the proposed site, neither Batley nor Morley Council approved the recommendations of the Working Party. Nationally, the majority of people agree that there should be sites to cater for people who have chosen this way of life, but as soon as actual sites are chosen, the same people will oppose such a proposition tooth and nail and any progress at all to provide sites for gypsy caravans becomes virtually impossible. The position of officers responsible for removing these caravans from unlicensed sites becomes very difficult indeed.

Throughout the year, regular routine inspections of retail food shops and food preparing premises took place and close observations were made on new food industries setting up in the Borough. These observations were commenced at the plans stage and there followed discussions with representatives of the firms so that any difficulties were ironed out before the firms came into operation. Inspections were carried out under the provisions of the Offices, Shops and Railway Premises Act and 123 premises were inspected in detail. Apart from minor contraventions of the Act, the premises inspected complied with the major requirements of the Act.

During the year 11 Clearance Areas involving 139 houses were represented to the Health Committee and 32 houses were dealt with individually and became the subject of either Demolition or Closing Orders. At the end of the year, there remained approximately 1200 houses included in the Clearance

programme still to be dealt with and both the first and second programmes should be completed by 1975. 4 Clearance Orders and 1 Compulsory Purchase Order were confirmed by the Minister during the year. All the Orders were confirmed without modification and in all 111 houses were involved.

Two applications for Discretionary Grants were approved during the year and 251 applications for Standard Grants were approved, an increase of 45 on the previous year. The number of standard grants completed and paid during the year was 219. In March, the Housing Committee declared properties in the Springfield Lane and Springfield Road area of Morley as Improvement Area No. 3. In this area quite a number of houses had been improved voluntarily by the owners and at the time the area was declared as an Improvement Area, there were 98 houses which required improvement. Further progress was made in the improvement of houses included in Improvement Areas Nos. 1 and 2 and several applications by tenants to have their houses, which were outside improvement areas, improved by the provision of the five standard amenities, were dealt with during the year.

Progress was made during the year in the Smoke Control programme and 3 areas, Nos. 29, 34 and 35 with a total of 690 houses came into operation on the 1st July, 1968. Smoke Control Areas Nos. 36 and 37 with a total of 588 houses were confirmed by the Minister to become operative on the 1st July, 1969. Towards the end of the year the Health Committee approved the making of Smoke Control Orders in respect of Areas Nos. 38, 39 and 40 and 41 with a total of 693 houses. At the end of the year the 41 areas, declared as Smoke Control Areas covered a total acreage of 5,138 acres and included 7,023 premises.

The department was able to give Dr. Ireland some assistance in setting up a very excellent Home Safety Exhibition. As part of the exhibition a vacant house in close proximity to the Town Hall was furnished and shown as a 'Hazard House' which pinpointed the many causes of accidents in the home. The exhibition was acclaimed by R.O.S.P.A. in their view as one of the best exhibitions organised in the country and it also received northern Press, radio and television coverage.

Several staff changes took place during the year, Mr. G. Padgett joined the Department from Pudsey Borough as a District Public Health Inspector in February but left in August

to take up a similar position in Llanelli, South Wales. Mr. S. G. Garden was successful in passing the qualifying examination in June and was appointed as District Public Health Inspector within the establishment and Mr. A. Blythe filled a similar vacancy in October joining the department from Leeds County Borough. Mr. R. Crabtree, Chief Clerk reached the age of retirement in July and it was with deep regret that the department learnt of his passing away in March 1969. Mrs. B. Thackray was promoted to the position of Chief Clerk and Miss E. Speight joined the department as a Junior Clerk in August.

I wish to record my sincere appreciation to Dr. Ireland for the interest he has taken in all the activities of this department. I should like to pay tribute to the whole of the staff, inspectional, clerical and cleansing staff who have given me loyal and conscientious support and to express my thanks and appreciation for the many ways in which the Chairman and members of the Health Committee have supported our work throughout the year.

E. CYRIL LEWIS,

Chief Public Health Inspector.

SANITARY CIRCUMSTANCES OF THE BOROUGH

WATER SUPPLY

The Corporation, until 1st October, 1961, owned the Waterworks undertaking but by the terms of the Wakefield and District Water Order, 1961, the Borough Water Undertaking lost its separate identity and was transferred to the New Board which now supplies water for domestic and industrial purposes.

The water supplied by the Board comes in part from the Board's reservoir at Withens Clough and in part from supplies purchased from Halifax and Bradford Corporations.

The water collected at Withens is upland surface water from the moors. It is water free from pollution, but carrying a sediment of peaty matter and has an acid content.

At Withens the water is given an initial treatment by the addition of lime and alumina ferric. This is followed by pressure filtration, which removes the bulk of the sediment. The water is piped from Withens to Morley, a distance of 20 miles and is there stored in service reservoirs. The additional water from Halifax Corporation is also stored in these reservoirs. A final treatment by chlorination is carried out here.

Regular sampling is undertaken by the Water Board and by the Public Health Inspectors. The following details are given of samples taken during 1968, by Public Health Inspectors.

	Chemical		Plumbo-Solvency		Bacteriological	
	Sat.	Unsat.	Sat.	Unsat.	Sat.	Unsat.
Public Supply	—	—	4	—	89	9
Private supply	—	—	—	—	—	—
Total	—	—	4	—	89	9

The nine unsatisfactory samples were from houses in the Drighlington area, this area being supplied with water purchased from Bradford Corporation. The fault was found to be due to major road construction being carried out within the Bradford boundary. Resampling of the supply continued until satisfactory results were obtained.

DRAINAGE AND SEWERAGE

No. of houses connected to sewers	16300
No. of houses with satisfactory private drainage	82
No. of houses with unsatisfactory drainage	6

The following districts of the Borough are still unsewered:—

- (a) Gelderd Road.
- (b) Tingley Common.
- (c) Woodhouse Lane, East Ardsley.

The houses with unsatisfactory drainage are situated in remote unsewered areas and are gradually becoming less in number.

SEWAGE DISPOSAL

The following information has been given by the Borough Engineer.

Sewerage and Sewage Disposal Schemes:—

- (i) Completed during the year—Miscellaneous small housing estates drainage.
- (ii) Under construction at year end—Reconstruction of Drighlington Sewage Works.
- (iii) Awaiting approval at year end—None.
- (iv) In preparation at year end—Schemes for further works at Dewsbury Road and Fenton Dam Sewage Works.

Attention is being given to storm water overflows for the Churwell and Common Lane, East Ardsley areas.

Other Disposal Works have proved satisfactory throughout the year.

CLOSET ACCOMMODATION

No. of water closets	16382
No. of waste water closets	—
No. of privy middens	6
No. of pail or tub closets	—

PUBLIC CLEANSING

Summarised statistics for the year ended 31st December, 1968, are given below:—

Total weight of refuse collected (estimated) 15,840 tons.

No. of premises from which refuse is collected—17,701 premises.

Net cost per ton £3.6.8.

Net cost per 1,000 population £1,201.

Net cost per 1,000 premises £2,983.

Refuse Collection.

There was a slight improvement in the rate of collection as compared with previous years and it was possible to maintain a collection service throughout the month of August due to staggering the annual holiday period of drivers and collection staff. Work study and work measurement of the service was commenced in August and continued to the end of the year. Each round was studied in turn and during the period of study, a full complement of men was made available for each round being studied. The aim of the study was fully explained to all the collection staff before it began and the staff appointed their own representative who accompanied the Work Study Officer during the whole period of study. It was gratifying to find that each round gave complete co-operation to the Work Study Officer during the period of study and the whole operation was carried out on a friendly basis. It was now possible to explain to complainants that steps had been taken to improve the service and that within a period of months, it would be possible to provide a regular and adequate collection service. The average monthly percentage hours lost during the year was as follows:—

Sickness	Holidays	Other Reasons
7.3	6.4	0.2

A substantial demand was made on the service to remove bulk items of refuse which could not be removed during the normal round and as far as was possible this demand was met without disrupting still further the domestic collection service. Permits were given for persons to take refuse direct to the tip using their own vehicles, and the only stipulation made was that the refuse had to be taken to the tip during normal working hours. Every effort was made to assist industrialists with premises in the Borough to deal with their industrial waste by allowing them to use the tip but permission had to be refused where it was considered that the refuse was unsuitable to be deposited on the Corporation tip.

The following is the scale of charges approved by the Council for the removal of trade refuse:—

Annual Charge per bin ...	£2.15.0
Annual Charge per load	£185. 0.0
Charge per load for single collection	£4. 0.0
Charge for odd items collected:—	10.0 per piano 5.0 each other item
Charge for tipping facilities	6.0 per load

The following table shows the number and type of vehicles
operated by the Department at the end of 1968.

Make	Reg. No.	Year Purchased	Type of Body	Capacity	Duty
Austin	5542WW	1960	Side Loader	12 cu. yd.	Spare vehicle
Dennis	5826WY	1961	Compression	18/24 cu. yd.	Refuse collection
S & D	156GWR	1963	Compression	35 cu. yd.	Refuse collection
S & D	EWR175C	1964	Compression	35 cu. yd.	Refuse collection
S & D	HYG341C	1965	Compression	35 cu. yd.	Refuse collection
S & D	NWR695D	1966	Compression	35 cu. yd.	Refuse collection
Austin	TWR656F	1967	Side Loader	12 cu. yd.	Refuse collection
Austin	TWR657F	1967	Side Loader	12 cu. yd.	Refuse collection
Morris	669CWX	1963	Dropside truck	2 tons	Paper collection
Weatherall	CCX700B	1964	Loading Shovel	—	Tip operations
Austin	HWY554C	1965	Mini Van	5 cwt.	Public conveniences
Austin	HWY555C	1965	Mini Van	5 cwt.	Handyman Duties
Austin	MYG349D	1966	A.35	5 cwt.	Cleansing Officer's Duties

Refuse Disposal.

All the refuse collected was disposed of on the tip at Dewsbury Road, Tingley. It was not necessary to spend money on culverting at the tip during the year. Regular treatment of the tip against rat infestation was undertaken by Rentokil Laboratories Ltd. throughout the year and this problem at the tip has been negligible for the last few years. With an adequate supply of sealing material being available at the tip, there was no nuisance from tip fires during the year and steps were taken to prevent paper and celophane being blown on to adjoining land. Adequate cover of the exposed faces of the tip acted as a deterrent to unauthorised persons visiting the tip for totting purposes and the tip seems to be no longer a playground for children at weekends. The increase in the amount of refuse being tipped each year has caused grave concern about the remaining life of the tip and before long steps will have to be taken either to find another suitable site or to extend the area available for tipping at Dewsbury Road.

Abandoned Vehicles.

There is an ever increasing number of vehicles being found abandoned usually on waste land in the Borough. Unless immediate action is taken to remove these vehicles, they can become a source of danger to children as on occasions, it is found that petrol has been left in the tanks. No vehicle can be removed until exhaustive enquiries have been carried out as to their ownerships and during the period of enquiry, it is found that parts are taken from the vehicles. This practice could mean a charge having to be made to remove the vehicle as a 'non-runner' but so far through the co-operation of a commercial waste trader in the Borough, no cost has been incurred in removing vehicles. As owners of these vehicles are seldom traced, any charges made for removing them would be yet another charge on the refuse collection service.

Waste Paper.

All the salvage income was derived from the sale of waste paper. Collected waste paper is taken to the Central Depot where it is baled. Baling is carried out with the use of a power operated press. In addition to the waste paper collected on the refuse collection rounds, one vehicle, a drop side truck is engaged solely on the collection of waste paper from shops, offices and industrial premises. No charge is made for the collection of clean waste paper.

There was an increase of 3 tons in the amount of waste paper collected in the preceding year, and the target of 30 tons per month was reached for the year.

Income from the sale of waste paper for 1968 was £3,052 and the total weight of waste paper collected was 371 tons.

Tonnages for recent years are set out below:—

1956	169	tons
1957	166	..
1958	169	..
1959	151	..
1960	217	..
1961	266	..
1962	218	..
1963	227	..
1964	294	..
1965	378	..
1966	369	..
1967	368	..
1968	371	..

General.

Since the inception of the salvage scheme in 1950 a total of £58,361 has been received from the sale of salvage material.

PUBLIC CONVENIENCES

Public conveniences are provided at the following sites in the Borough:—

Town Hall	Men
Princess Street	Women
(Temporary)	
Bridge Street	Men
Fountain Street	Men and Women
Tingley Mills	Men and Women
Bruntcliffe	Men and Women
Scatcherd Park	Men and Women
Chapel Hill	Men and Women
Churwell	Men and Women
Gildersome	Men and Women
Drighlington	Men and Women
Westerton Road	Men and Women
East Ardsley Recreation Ground.	Men and Women

In addition to the above, as the Department had a vehicle and equipment available for the cleansing of public conveniences, the following conveniences were taken over from the Parks Department for the purpose of daily cleansing:—

Lewisham Park.

Dartmouth Park.

Churwell Park.

Drighlington Park.

Every convenience is visited and cleansed daily and minor repairs are carried out where required. The vehicle used for the transport of the public convenience attendant assists the Divisional Health Office to operate a laundry scheme for incontinent persons. The attendant collects soiled laundry at the houses, transports them for washing and ironing at Dewsbury General Infirmary and returns clean laundry to the houses. The Lewisham Park conveniences had to be closed during the year because of the severe damage caused to them by vandals.

MORTUARY

The new mortuary was brought into use in October 1966. The new building adjoins the central depot in Corporation Street and is situate at the rear of the new police station. It comprises a reception room in which a 3 tier refrigerator is provided, a post-mortem room, an office for the pathologist, ante-room and suitable viewing room.

The Mortuary attendant retired during the year on the grounds of ill health and the Department was fortunate that her daughter agreed to take over the sometimes onerous but extremely vital duties from her mother.

NUISANCES

The following table is a summary of nuisances found and dealt with during 1968:—

Nuisances	Found	Abated
Choked drains and gullies	50	43
Defective drainage	9	6
Defective sink waste pipes	5	1
Defective gutters and downspouts	33	40
Defective plasterwork	11	17
Defective sashcords	10	9
Defective water closets	39	23
Dirty Water closets	1	1
Defective woodwork	7	6
Defects of water supply	2	1
Inadequate water supply	7	10
House dilapidations	58	35
Dampness in dwellings	17	8
Rain penetration of dwellings	20	19
Worn sinks	1	—
Defective bath	1	—
Worn entrance steps	—	2
Accumulation of rubbish	3	1
Defective paving	2	—
Insufficient refuse accommodation	28	24
Offensive accumulation	3	4
Reflux of smoke	3	2
Defective stonework	—	11
Defective roofs	27	28
Defective entrance door	1	—
Dangerous wall	—	2
Dangerous fireplace	1	1
Defective pointing	7	8
Lack of cooking facilities	1	1
Defective brickwork	2	—
Defective threshold	1	—
	—	—
	350	303
	—	—

Total number of visits made in connection with the

above nuisances	2693
Statutory notices served	65
Informal notices served	350

303 informal notices and 69 statutory notices were complied with.

There was a slight increase in the number of nuisances investigated during the year, the increase being mainly complaints of defective roofs and choked drains. Complaints of choked drains came from comparatively new houses in the area and not from older properties as one would expect and in some estates the standard of drainage is of very poor quality and causes unnecessary expense to owner-occupiers of comparatively new houses. The number of complaints in respect of noise nuisances was not serious and it was possible to abate a number of such complaints without having to resort to the service of statutory notices. It was found necessary to investigate many of these complaints either during the evening or even late at night. Householders of a certain area in the Borough complained about a nuisance from bees but on investigation a nuisance could not be substantiated. If a nuisance did exist, it would have been difficult to deal with it statutorily and in this particular instance, the owner of the hives removed them to a less residential area. The majority of complaints of house dilapidations came from an area which soon will have to be dealt with as a Clearance Area.

Figures of Nuisances for the past five years were:—

1968	350
1967	334
1966	408
1965	431
1964	469

LETHAL CHAMBER

Unwanted or injured dogs brought for destruction are painlessly destroyed in the electro thanator. Similarly cats are dealt with in a Chloroform lethal chamber.

LAND CHARGES ACT

1192 enquiries under the Land Charges Act were investigated during the course of the year.

SWIMMING BATHS

There are two public swimming baths in Morley. These are enclosed baths with heated and treated water. The treatment consists of continuous filtration and the addition of chlorine and ammonia.

48 samples were taken from the swimming baths during 1968. Only 3 samples were reported on as being unsatisfactory.

In all cases of unsatisfactory results, re-sampling results showed the water to be satisfactory and safe for bathing.

VERMINOUS INFESTATION

The availability of insecticide over the years has made severe infestations of bed bugs, lice and fleas things of the past. Occasionally isolated cases arise and these are easily dealt with either by the department or as part of the comprehensive disinfection contract with Rentokil Laboratories. Isolated infestations of red mites arise mainly in new houses and these have been adequately dealt with by the use of malathion.

Furniture and effects of families moving into Council houses are inspected before removal takes place. In the majority of cases, this is no more than a precautionary measure and indeed in some cases this duty is an embarrassment for the inspector and possibly for the householder too.

Advantage is always taken of the advisory services of the Infestation Department of the Ministry of Agriculture, Fisheries and Food for the treatment of premises infested by lesser known species of insects.

Complaints of houses being infested with mushroom flies during the month of August were fully investigated. Prolonged treatment of the mushroom sheds nearby abated the nuisance but not before these minute insects had caused some considerable discomfort to the complaining householders.

RODENT CONTROL

Treatments carried out during the year.

Premises	Rats	Mice	Total
Domestic	275	162	437
Industrial	—	—	—
Commercial	25	24	49
	300	186	486

Total number of treatments carried out — 486.

The annual contract with Rentokil Laboratories for the comprehensive treatment of premises for rodent infestation was renewed for a further year. The previous annual contracts proved satisfactory in that there was a financial overall saving without giving an inferior service to householders and occupiers of commercial and industrial premises. The treatment cost to the latter on a rechargeable basis was higher than that charged by the department when we operated our own disinfection service but there were hardly any complaints. Many of the occupiers of commercial premises entered into private servicing contracts with Rentokil for the inspection and treatment of their premises.

The periodical inspection and treatment of sewage works and Dewsbury Road refuse tip has virtually cleared these areas of rat infestation. On the advice of representatives of the Ministry of Agriculture, Fisheries and Food, the number of sewer manholes treated is now a more realistic percentage of the total number of sewer manholes in the area.

The contract with Rentokil includes the periodical inspection and treatment of sewage works and refuse tips, the six monthly treatment of sewers and the treatment of domestic premises.

In practice, the department telephones complaints of infestations daily to the Rentokil office and their service operator carries out an inspection and treatment. A detailed schedule of premises inspected and treated is returned by the firm to the department for each month. The cost of rechargeable work is borne by the department who recovers it from the occupiers of the premises concerned. The method of dealing with complaints, the recording of treatments and the right of entry into premises were fully discussed and agreed before the contract was brought into effect.

ATMOSPHERIC POLLUTION.

Industrial Smoke—

No. of timed observations made 121

Excessive smoke emission from industrial premises in the Borough is no longer a serious nuisance. Mills still operating in the Borough have had boiler plants either renewed or modified so that the minimum of smoke is emitted and with efficient plants, apart from rare breakdowns, the department had little cause for complaints in respect of industrial premises during the year. It is hoped that by 1970, the Alkali Inspectorate will

have been able to put pressure on the owners of brickworks in the Borough to minimise smoke emission from brickwork chimneys to, at least, comply with the Permitted Periods Regulations. It is grieveing to householders in operative smoke control areas to see brickwork chimneys near their houses emitting volumes of black smoke over considerably long periods daily.

A considerable amount of time had to be spent to deal with smoke emission from industrial premises which was not from any chimney. The worst offenders were operators of car wrecking yards who set fire indiscriminately to tyres and car bodies and thereby causing a serious smoke nuisance. One such firm was prosecuted under provisions contained in the West Riding County Council (General Powers) Act 1964 for emitting dark smoke. Sites used as industrial tips were also the cause of excessive smoke emission and the occupier of a site used for tipping industrial waste was prosecuted during the year and the Magistrates issued a Nuisance Order. Warnings too had to be sent to demolition contractors employed by Motorway Contractors who created serious smoke nuisances when demolishing vacant premises which had been purchased by the Ministry of Transport for motorway purposes. Hardly any nuisance was caused by local demolition contractors when demolishing properties in Clearance Areas. Discussions were held with the occupiers of premises, from which smoke nuisance had been created, in an effort to assist them in their difficulties.

Recommendations were made to the Plans Sub Committee regarding the required heights of chimneys at proposed new commercial and industrial premises, where applicable.

The following Smoke Control Orders came into operation during the year :—

Smoke Control Order No. 29 — Development at Scott Green, Gildersome.

Smoke Control Order No. 34 — Bradford Road, Drighlington.

Smoke Control Order No. 35 — Part of Tingley and West Ardsley Ward.

The number of premises included in the Orders were in the region of 700 and the area involved was 370 acres.

The following two Smoke Control Orders were confirmed by the Minister during the year to become operative on the 1st July, 1969.

Smoke Control Order No. 36 — Fairfax Estate and Bradford Road, Drighlington.

Smoke Control Order No. 37—Part Tingley and Wester-ton district.

The area involved in these Orders was 105 acres and the Orders included approximately 600 premises of which 255 were Council houses.

Towards the end of the year Smoke Control Areas Nos. 38, 39, 40 and 41 were represented to the Health Committee and the four areas covered 330 acres and approximately 700 premises of which 100 were Council houses.

At the end of the year the 41 Smoke Control Areas made covered practically 6,000 acres and included in the region of 8,200 premises.

During the year a number of warning letters were sent to householders who, on observations carried out, were found to be burning unauthorised fuel in operative Smoke Control Areas. A small nucleus of householders still persisted in burning coal and eventually 6 were reported to the Health Committee. The Committee were reluctant in instituting legal proceedings but appreciated that no other course of action was open to them and realised that the position could get out of hand if no firm action was taken. Five cases were taken to court and fines were imposed by the Magistrate in each case and later when the sixth case was taken, the maximum fine of £10 was im-posed. Publicity given to the cases in the local Press acted as a deterrent to further offenders.

The following are details of Smoke Control Orders which were confirmed in the Borough at the 31st December, 1968.

**BOROUGH OF MORLEY.
SMOKE CONTROL AREAS.**

No.	Area	Acres	Premises	Total Estimated Cost	Health Committee Approval	Date of Order	Order Confirmed	Date of Operation of Order
1	Low Moor.	558	Coun.—441 Pvte.—71	£1,032	15.9.59	9.11.60	24.2.61	1.9.61
2	Springfield House, Victoria Road.	4½	Pvte.—60	Nil	15.9.59	9.11.60	24.2.61	1.9.61
3	Haigh Moor Road, West Ardsley.	9½	Pvte.—108	Nil	15.9.59	9.11.60	24.2.61	1.9.61
4	Harwill Avenue, Churwell.	2¾	Pvte.—25	Nil	15.9.59	9.11.60	24.2.61	1.9.61
5	City.	3½	Coun.—72	Nil	15.9.59	9.11.60	24.2.61	1.9.61
6	Moorhead, Gildersome.	22¾	Coun.—250	Nil	15.9.59	9.11.60	24.2.61	1.9.61
7	West Lea Estate.	6¼	Pvte.—53	Nil	15.9.59	9.11.60	24.2.61	1.9.61
8	Thornfield Estate, Dewsbury Road.	2¼	Pvte.—20	Nil	15.11.60	22.3.61	14.11.61	1.7.62
9	Ashwood Gardens Estate, Gildersome.	5½	Pvte.—39	Nil	15.11.60	22.3.61	14.11.61	1.7.62
10	Wakefield/Bradford Road.	1202	Coun.—141 Pvte.—520	£13,011	13.12.60	9.12.61	30.5.62	1.6.63

SMOKE CONTROL AREAS (Continued).

11	Old Road, Churwell.	72	Coun.—70 Pvte.—91	£271	13.12.60	22.3.61	14.11.61	1.6.63
12	Common Lane, East Ardsley.	3½	Pvte.—33	Nil	14.3.61	29.4.61	14.11.61	1.7.62
13	Rein Road Estate.	6	Pvte.—58	Nil	19.9.61	9.12.61	18.4.62	1.7.52
14	Main Street, East Ardsley.	4	Pvte.—42	Nil	19.9.61	9.12.61	18.4.62	1.6.63
15	Street Lane, Gildersome.	2	Pvte.—27	Nil	19.9.61	9.12.61	18.4.62	1.6.63
16	Reeddale Gardens, Street Lane, Gildersome.	16	Pvte.—76	£35	17.10.61	9.12.61	18.4.62	1.6.63
17	East Park Street (Development) Morley.	60	Pvte.—57	£15	17.10.61	9.12.61	18.4.62	1.6.63
18	Dean Park Estate, Drighlington.	122	Pvte.—124	Nil	17.10.61	9.12.61	18.4.62	1.6.63
19	Nepshaw Lane Estate, Asquith Avenue, Morley.	6	Coun.—74	Nil	20.2.62	2.6.62	8.10.62	1.6.63
20	Haigh Moor Road, West Ardsley.	14½	Pvte.—83	Nil	20.2.62	2.6.62	8.10.62	1.6.63
21	St. Peter's Crescent, Morley.	2½	Pvte.—32	Nil	20.11.62	10.12.62	29.3.63	1.10.63

SMOKE CONTROL AREAS (Continued).

22	College Road, Gildersome.	3	Pvte.—26	Nil	11.12.62	10.1.63	22.5.63	1.12.63
23	Development Church Street, Morley.	416	Pvte.—261	£327	11.12.62	24.1.63	22.5.63	1.12.63
24	Upper Green, West Ardsley.	1.5	Pvte.—14	Nil	11.12.62	15.2.63	22.5.63	1.12.63
25	West Ardsley/Wood- kirk.	900	Pvte.—585	£11,095	15.1.63	29.3.63	11.9.63	1.6.64
26	Churwell Park Estate.	4	Coun.—74	Nil	19.2.63	21.3.63	27.8.63	1.6.64
27	Jackson Lane Re-development.	6	Coun.—100	Nil	19.3.63	23.4.63	11.9.63	1.6.64
28	North Ward	743	Coun.—409 Pvte.—562 Others—31	£46,754	28.5.64	5.6.64	29.12.64	1.7.67
29	Scott Green, Gildersome	18	Pvte.—173	£120	13.9.63	3.5.67	31.7.67	1.7.68
30	Development: King St. Moorside Rd., Drigh.	25	Pvte.—132 Coun.—74	£220	15.12.64	6.1.65	19.8.65	1.7.66
31	Development: Lewisham Grove, Morley.	9	Pvte.—32 Others—2	Nil	16.3.65	2.4.65	19.8.65	1.6.66
32	Moorhead Est. Gild.	4	Coun.—58	£6,000	16.3.65	17.6.65	19.8.65	1.4.66

SMOKE CONTROL AREAS (Continued)

33	Buckross Dev. Moorside Rd., Drigh.	100	Pvte.—125	Nil	8.9.65	3.12.65	16.2.66	1.9.66
34	Bradford Road, Drighlington.	150	Pvte.—26 Coun.—86	£8,907	13.12.66	3.5.67	31.7.67	1.7.68
35	Tingley/West Ardsley.	200	Pvte.—319 Coun.—86	£14,760	13.12.66	3.5.67	31.7.67	1.7.68
36	Fairfax Estate, Drighlington.	45	Pvte.—19 Coun.—167	£12,500	18.1.68	25.3.68	6.6.68	1.7.69
37	Tingley/ Westerton.	60	Pvte—316 Coun.—88	£14,000	18.1.68	25.3.68	6.6.68	1.7.69

Atmospheric pollution recording gauges were in use in the Borough throughout the year. Three types of instruments are in use. Soot deposit gauges record the total soot deposits. sulphur recording gauges indicate the sulphur pollution and a suction air filter records the general pollution of the air in particles. One of each of these types of gauge is in use in the central Morley area, and a suction air filter is in use in the Gildersome area.

Results obtained from the instruments are as follows:—

Central Morley.

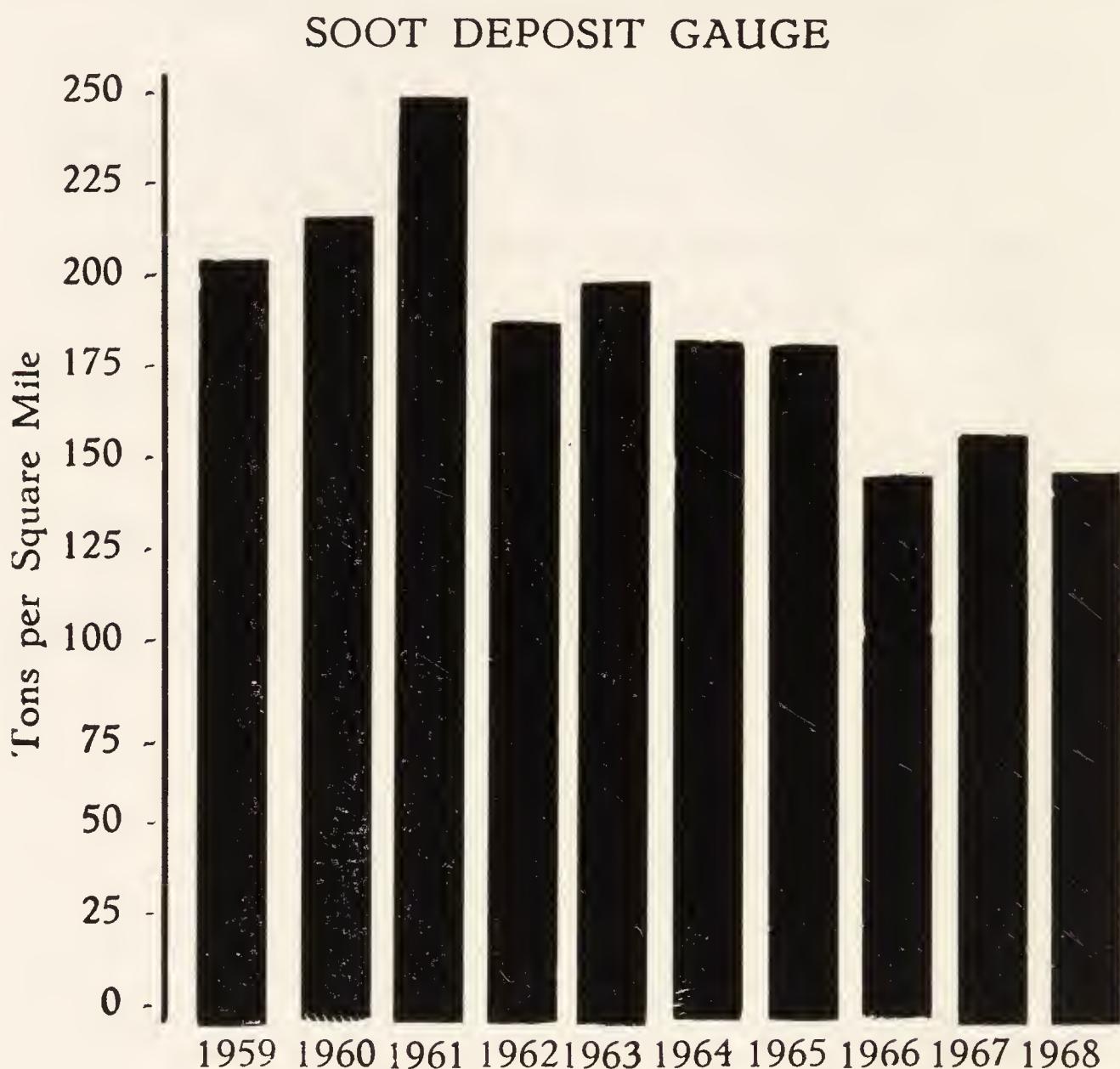
	Central Morley			
	SO ₃ Cyl-			
	Deposit Gauge (Tons per sq. mile)	inder (Milli- grams per day)	Air Filte, (Mg/100 ms per day)	Air Filter Gildersome Mg./100 ms per day)
January	6.94	1.12	13	10
February ...	10.63	0.77	20	14
March	10.15	2.61	8	6
April	26.59	1.88	8	5
May	11.96	Discontinued	7	4
June	13.48		3	2
July	11.69		5	3
August	7.85		4	2
September ...	8.40		7	5
October	12.51		11	9
November ...	12.30		14	9
December ...	8.06		19	14

The following table shows the average daily concentration of smoke and sulphur dioxide from the year 1956 to 1968.

Results in Microgrammes per Cubic Metre
Morley **Gildersome**

	Smoke Stains (Average daily Suspended Impurity)	Sulphor Dioxide	Smoke Stains (Average daily Suspended Impurity)	Sulphor Dioxide
1956	230	—		
1957	192	—		
1958	210	—		
1959	250	—		
1960	230	—		
1961	223	—		
1962	227	—		
1963	204	213		
1964	177	193		
1965	149	161	93	106
1966	136	152	96	88
1967	102	136	78	83
1968	99	140	69	96

Comparisons between the results shown by the soot deposit gauge over the past few years are shown on the diagram.



RAG FLOCK ACT

The Rag Flock and Other Filling Materials Act, 1951 makes it the duty of the local authority to supervise the manufacture of rag flock and to control the use of materials used in the filling of furniture, toys and bedding.

No. of premises licensed for the manufacture of Rag Flock	—
No. of premises registered for the filling of furniture, bedding, etc.	3
Total number of inspections	1

FACTORIES

The following summary shows the work done by the Public Health Inspectors under the provisions of the Factories Act, 1961.

1. Inspections for purposes of provisions as to health (including inspections made by Public Health Inspectors):—

Premises	Number on Register (3)	Number of		
		Inspec- tions (4)	Written Notices (5)	Occupi- ers prose- cuted (6)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	42	3	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	280	31	6	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	3	—	—	—

2. Cases in which defects were found.

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Reme-died	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness ...	—	—	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences:					
(a) Insufficient	2	1	—	—	—
(b) Unsuitable or defective	4	3	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
	6	4	—	—	—

Part VIII of the Act
OUTWORK

Sections 133 and 134.

Nature of Work	No. of out-workers	No. of cases of def. sending lists	No. of Prosecutions	No. of Instances	Notices served	Prosecutions
Wearing Apparel:						
Making, etc.	2					
Cleaning and Washing						
Household Linen						
Lace, lace curtains and nets ...						
Curtains and furniture hangings						
Furniture and upholstery						
Electro-plate						
File making						
Brass and brass articles						
Fur pulling						
Iron and steel						
Anchors and grapnels						
Cart gear						
Locks, latches and keys						
Umbrellas, etc.						
Artificial flowers						
Nets, other than wire nets						
Tents						
Sacks						
Racquet and tennis balls						
Paper bags						
The making of boxes or other receptacles or parts thereof made wholly or partially of paper						
Brush making						
Pea picking						
Feather sorting						
Carding of buttons, etc.						
Stuffed toys						
Basket making						
Chocolates and sweetmeats ...						
Cosakues, Christmas crackers...						
Christmas stockings, etc.						
Textile weaving	6					
Lampshades						
Total	8					

DISEASES OF ANIMALS ACTS

Foot and Mouth Disease

The Borough formed part of a much modified Controlled Area in which the movement of cloven-hoofed animals was under licence by Diseases of Animals authorities because of Foot and Mouth Disease Outbreaks. The issue of Press notices and arrangements to issue licences continued until the area became free of restriction on the 5th March, 1968. During the period of restriction on movement, from October 1967 to March 1968, over 300 movement licences were issued.

Transit of Horses Order

Observations were made of vehicles transporting horses to the two fairs at Lee Gap, West Ardsley during August and September and a substantial improvement was found in the condition of all the vehicles.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Registration and Inspection.

During the year 13 new premises employing 52 persons were registered under the Act. Detailed inspections were carried out at 71 new premises and re-inspections were carried out at 52 premises during the year. By the end of 1968 397 premises employing a total of 1,651 persons had been registered under the Act.

Cleanliness.

The premises visited were largely found to be satisfactory although on a few occasions the employers attention had to be drawn to the fact that it is his duty to keep all parts of the premises clean. Little-used storerooms in certain types of offices were the most common places where a more frequent cleaning routine was needed.

Overcrowding

No cases of overcrowding were found in premises in the Borough. It would appear that staff have set a commonly accepted standard of free space in office premises which is in excess of the minimum legal requirement of 40 square feet per person.

Heating

Difficulties were encountered by some employers during the winter months in achieving the minimum temperature of 60.8°F after the first hour. Informal advice was given by Public Health Inspectors and generally the problems were solved by the provision of supplementary space heating. In no case was formal action necessary.

Ventilation

The majority of premises inspected were found to be well ventilated. However, special attention was paid to the problems encountered with coin operated dry cleaning machines in launderettes. Liaison with owners and machine manufacturers ensured that there was no danger to the general public from fumes arising from the solvent fluids used in the process.

Lighting

Generally lighting standards were found to be much improved. The requirements of the Act are now largely accepted by employers and the cases where advice was necessary concerned more stringent standards in premises where fine work, such as technical drawing or sewing was undertaken.

Washing Facilities.

Facilities were found to be satisfactory in nearly all cases. Some action was necessary in respect of the provision of hot water to existing wash basins.

Sanitary Conveniences.

The only problems encountered with this section concerned the accessibility of external sanitary accommodation. These were solved without recourse to formal action.

Accidents.

Two accidents were notified during the year. Both were not fatal and occurred in warehouses. One employee received a bruised shoulder due to a falling vehicle seat and another employee received laceration of the hand due to a projection on a vehicle door. Neither accident could be attributed to negligence on the part of the employers.

General.

During the year Regulations were issued by the Department of Employment and Productivity to establish safety requirements for Hoists and Lifts in premises covered by the Act. Two District Public Health Inspectors received specialist training in the enforcement of the new Regulations. Routine inspections revealed that no action was necessary to safeguard employees in any premises in the Borough.

Table A.

Class of premises	Registered during year	Total Registered at year end	Premises receiving a general inspection during year
Offices	2	126	11
Retail Shops	6	181	33
Wholesale Shops and Warehouses	3	34	6
Catering Establishments open to the public — Canteens	2	51	21
Fuel Storage Depots	1	5	—
Total	13	397	71

Table B.

Number of visits of all kinds made by Inspectors to Registered premises 123

Table C.

Analysis of persons employed in Registered Premises by Workplace.

Class of Workplace	Number Employed		
	Male	Female	Total
Offices	574		
Retail Shops	603		
Wholesale Departments, Warehouses	221		
Catering Establishments open to the Public	225		
Canteens	12		
Fuel Storage Depots	16		
Totals	803	848	1651

Accidents reported:—

Workplace	Fatal or Non-Fatal	Injury		
		Cause	Nature	Site
Warehouse	Non- Fatal	Struck by falling vehicle seat	Bruising	Shoulder
Warehouse	Non-Fatal	Projection on vehicle door	Laceration	Hand

HAIRDRESSERS AND BARBERS

The West Riding County Council (General Powers) Act, 1951 and the Public Health Act, 1961, provides that no person shall carry on the trade of hairdresser or barber unless he and his premises are registered by the local authority.

Regulations also empower the local authority to make bye-laws for controlling the trade of hairdressing and such byelaws are in operation in this area.

There are 45 hairdressers on the register and 30 visits of inspection were made to these premises.

OFFENSIVE TRADES

There are three premises in the borough where offensive trades are carried on. One of these is used for the refining of dripping and tallow, one for fat melting, bone boiling, glue making, gut scraping, tripe boiling, soap making and fat extracting and in the other gut scraping and fat boiling is carried out.

Application by a firm of edible fats refiners for consent to establish an offensive trade in the Valley Road area of Morley was refused by the Council on the grounds that no adequate guarantee could be given by the firm not to create a smell nuisance.

Byelaws are in operation for the control of all these trades and during the year 6 inspections were carried out.

HOUSING

General Statistics.

No. of back to back houses in area	2691
No. of single back houses in area	634
No. of through houses (excluding Council houses)	8329
No. of Council houses	4734
No. of houses included in Council's Slum Clearance Programmes	4258
No. of above houses represented up to end of 1968	3003
Total number of houses in the area	16388
No. of dwellinghouses repaired as a result of informal action	303

Repair of Houses.

No. of dwellinghouses repaired as a result of Statutory Action under the Housing Act, 1957	—
No. of houses repaired as a result of Statutory Action under the Public Health Act, 1936	69
Total number of houses repaired	303
Total No. of inspections made in connection with the above	2693

Improvement Grants.

No. of improvement grants approved during the year	253
Discretionary Grants	2
Standard Grants	251

Slum Clearance.

(a) Individual houses.

No. of houses in respect of which Demolition Orders were made	29
No. of houses or parts of buildings in respect of which Closing Orders were made	3
No. of houses closed or demolished as a result of informal action by local authority	—

(b) Clearance Areas

No. of Clearance Areas declared during the year	11
No. of houses included in these areas	139
No. of persons to be displaced	221

(c) Total number of families rehoused from clearance areas or individual unfit houses during the year

85

New House Building

No. of new houses provided during the year:—

(a) By local authority	45
(b) By private enterprise	307

Total 352

Overcrowding.

The number of cases of statutory overcrowding in the area is negligible. There are however a decreasing number of cases of overcrowding on bedroom standard where persons of opposite sex over the age of 10 years have to share a bedroom. Whenever such cases come to light they are reported to the Tenancy sub-Committee and the majority of cases are given sympathetic consideration. On the whole the Borough has not an overcrowding problem of any magnitude.

Clearance.

There were 11 Clearance Areas declared during the year with a total of 139 houses and 32 houses were made the subject of Demolition and Closing Orders (29 Demolition Orders and 3 Closing Orders). The number of Orders confirmed by the Ministry during the year was 5 (one Compulsory Purchase Order and four Clearance Orders) with a total of 111 houses. Clearance action involved the holding of 2 Public Inquiries in respect of 3 Orders during the year. All the Orders were confirmed without modification.

Improvement.

The number of Standard Improvement Grants approved during the year was 251 and 153 of these were in respect of tenanted houses. Payment of grant was made in respect of 219 houses and a number of these houses were included in the 3 Improvement Areas.

Statutory action was taken in respect of the 2 Improvement Areas Nos. 1 and 2 and owners and occupiers of the dwellinghouses concerned were invited to meet the Housing General sub-Committee to discuss the proposals in accordance with the provisions of the Housing Act, 1964. In addition similar action was taken in respect of houses outside Improvement Areas where the tenants, had made written representation to the Council for their homes to be provided with the standard amenities.

The statutory action taken was as follows:—

Improvement Area No. 1.

Number of Final Notices served 1

Improvement Area No. 2.

Number of Undertakings accepted 10

Number of Immediate Notices served 7

Number of Suspended Notices served 8

Houses Outside Improvement Areas.

Number of Undertakings accepted 27

Number of Immediate Notices served 4

The following table shows the progress made in all 3 Improvement Areas and on tenants' applications in houses outside Improvement Areas.

Compulsory Improvements — Progress Report

IMPROVEMENT AREAS				
		Area No. 1 Fountain St.	Area No. 2 Zoar Street	Area No. 3 Springfield
No. of unimproved houses at time of declaration	166	87	62	63
No. improved since time of declaration	129	—	—	18
Improvement works in progress	5	—	—	—
Total not yet improved made up as follows:—	32	25	—	45
Houses subject to Final or Immediate Notices	2	—	—	—
Suspended Notices (Tenants unwilling)	16	6	—	—
Owner occupied	14	7	4	10
Undertakings to improve	—	—	8	10
Council to purchase	—	—	—	—
Standard Grant Applications—not yet improved	—	—	—	11
Pending Notices not yet served	—	—	—	14
Improvements Outside Areas				
Tenants Applications received	108	Immediate Notice	1	
No. of houses improved	45	Not proceeded with	2	
Undertakings to improve	53	Included in Improvement Area	1	
		Pending	6	

The following table gives an indication of the state of the Council's Clearance programmes:—

BOROUGH OF MORLEY — SLUM CLEARANCE.

Total Number of Houses submitted to Ministry in 1954 — 2,661.

Total Ultimately dealt with—2,865 houses
Houses dealt with by Slum Clearance

	North	Central	Denshaw	Dartmouth	Birks	Churwell	Tingley	West Ardsley	East Ardsley	Gildersome	Drighlington
Remaining Clearance Programme in Wards 1968-1975	85	140	164*	51	249	111	47	48	36	95†	47
1968 houses	171	171	171	171	171	66	12	35	1	31	26
1967 houses	190	190	190	190	190	66	2	24	30	33	5
1966 houses	130	130	130	130	130	67	11	18	3	26	5
1965 houses	308	308	308	308	308	145	21	30	49	14	49
1964 houses	319	319	319	319	319	124	40	34	64	27	30
1963 houses	333	333	333	333	333	147	—	51	18	66	67
1962 houses	328	328	328	328	328	132	43	57	9	20	25
1961 houses	310	310	310	310	310	40	42	65	34	55	58
1960 houses	334	334	334	334	334	153	44	—	24	62	108
1954-1959 (1st five years) houses	767	767	767	767	767	475	36	—	49	—	—

* Wesley Street Area will not be submitted for confirmation until 1969.

† Many of these houses are suitable for improvement.

INSPECTION AND SUPERVISION OF FOOD AND FOOD PREMISES.

MILK—DAIRIES

Summary of Milk Dealers on Register.

Dairies	6
Distributors	154
Licensed retailers of Pasteurised Milk	47
Licensed retailers of Tuberculin Tested Milk	24
Licensed retailers of Sterilised Milk	156
Licensed bottlers of Tuberculin Tested Milk	—
Renewal of licences in January 1966 became the responsibility of the Council as the Food and Drugs Authority.	

Inspections.

Visits of inspection to milk dealers	23
Legal proceedings taken—None.	
Formal Action taken—None.	
Informal action taken—None.	

Milk Sampling.

1. Biological Samples.

Number of Samples taken for :—

(a) Tuberculosis ...	37	No. Positive	Nil
(b) Anti Biotics	37	No. Positive	Nil
(c) Brucellosis			
Ring Test	37	No. Positive	3
Cream Culture...	1	No. Positive	1
Guinea Pig	Nil	No. Positive	Nil

The position regarding the presence of brucella abortus in milk is far more satisfactory than that shown by the sampling of raw milk in previous years. Of the 37 samples taken, only 3 samples gave a positive result on ring test and one only proved positive on the cream culture test. This sample was of milk produced at a farm situated outside the Borough boundary. Notice was served under Regulation 20 of the Milk and Dairies (General) Regulations 1959 and the action taken was in accordance with Circular 17/66 of the Ministry of Health. A copy of the Notice was served on the dairy from which the milk was distributed and the firm concerned stopped the supply of milk from this source until the necessary steps had been taken for securing the wholesomeness of the milk.

(2) Statutory Samples.

	No. Examined	Phos.	No. Satisfactory	Meth Blue	Turbidity	Test
Untreated ...	44	—	42		—	
Pasteurised ...	45	45	43		—	
Sterilised	8	—	—		—	8

The two samples of untreated milk reported upon as not satisfying the methylene blue test were satisfactory on re-sampling.

3. Chemical Samples under Food and Drugs Act, 1955.

No. taken	58
No. found adulterated	Nil

Sampling of Ice Cream.

No. submitted for Bacteriological Examination	26
No. satisfactory	26
No. submitted for Chemical Analysis	1
No. satisfactory	1

Sampling of other Food.**Bacteriological Examination.**

Article	No. Submitted	No. Satisfactory
Fish Spread	2	2
Cumberland Creamed Rum and Butter spread	1	1
Brandy	1	1
Whisky	1	1
Vodka	1	1
Rum	1	1
Gin	3	3
Pork pies	2	2
Pork sausage	2	1
Beef sausage	4	4
Beef Burgers	1	1
Stewed steak	1	1
Ice cream	1	1
Dripping	1	1
Bickie Pegs	1	0
Bread	1	1
Lemon Cheese	1	1
Thin Yorkshire Honey ...	1	1
Baking Powder	1	1
Potted Beef Paste	1	1
Potted beef	1	0

Ground coffee	1	1
Bilberry cream pie	1	1
Cheese Spread	1	1
Tartare sauce	1	1
Buttered Teacake	1	0
Polony	1	1
Mixed beef and pork sausage	1	1
Bitter beer	1	1
Cream Tart	1	1
Salad Cream	1	1
Custard Powder	1	1
Rice creamola	1	1
Coffee and Chicory essence	1	1

Unsatisfactory Chemical Samples

The following action was taken in respect of the unsatisfactory chemical samples:—

Pork Sausages. Affected with mould — Legal proceedings instituted.

Bickie pegs. Affected with mould — Legal proceedings instituted.

Potted Beef. Misdescribed — Warning letter sent.

Buttered Tea cake. Spread with margarine — Warning letter sent.

Liquid Egg.

Rigorous control was exercised throughout the year on the processing and heat treatment of liquid egg at the breaking plant in the Borough and 603 samples were submitted for examination. All the samples complied with the requirements of the Liquid Egg (Pasteurisation) Regulations, 1963.

Meat Inspection.

Number of slaughterhouses licensed	3
Number of visits made	706

All three slaughterhouses in the Borough were in operation throughout the year and a 100 per cent. inspection of animals slaughtered for human food was carried out. Tribute should be paid to the butchers for the high quality of the meat. Slaughtering takes place during weekdays and Saturdays until 1.00 p.m. Regulations governing the hours of slaughtering came into operation on the 1st December 1966. No complaints

have been made by the butchers on having to discontinue slaughtering on Sundays. The cold storage units at each slaughterhouse have been extended and this avoided any hardship arising from the restriction of slaughtering to 5½ days per week.

All meat condemned at slaughterhouses is at all times collected and disposed of by the Department and in accordance with the provisions of The Meat (Staining and Sterilisation) Regulations. The table overleaf gives details of carcasses inspected and the meat condemned.

The total weight of meat condemned was 2 ton, 13 cwt.

Charges for meat inspection were operated from the 1st October, 1963, from which date maximum charges allowed by the Regulations viz. 2/6 for cattle, 9d. for pigs and 6d. for sheep have been made. The income obtained for the year ending December, 1968 was £453.14.6.

Meat Inspection

The following table gives details of the carcases and offal inspected and condemned in whole or in part :—

	Cattle, excl. Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	1382	402	17	7482	1127	—
Number inspected	1382	402	17	7482	1127	—
All diseases ex- cept Tuberculosis and Cysticerci						
Whole carcases condemned	—	—	1	10	1	—
Carcases of which some part or organ was condemned	308	63	1	495	75	—
Percentage of the number inspec- ted affected with disease other than tuberculo- sis & cysticerci	22.3	15.6	5.9	6.6	6.6	—
Tuberculosis only						
Whole carcases condemned	—	—	—	—	—	—
Carcases of which some organ or part condemned	—	—	—	—	1	—
Percentage of the number inspec- ted affected with tuberculosis	—	—	—	—	0.09	—
Cysticercosis						
Carcases of which some part or organ was condemned	9	—	—	—	—	—
Carcases submit- ted to treatment by refrigeration	—	—	—	—	—	—
Gen. diseased and totally condemned	—	—	—	—	—	—

Details of Meat Condemned.**Whole Carcasses:****(a) Tuberculosis Only**

Bovine	Pigs
Nil	Nil

(b) Other Diseases

1 Sheep	Septic Pneumonia
8 Sheep	Emaciation
1 Sheep	Oedema and Emaciation
1 Pig	Pyaemia/Oedema
1 Calf	Oedema

Organs or Parts of Carcasses:**(a) Tuberculosis only**

Bovine	Pigs
Nil	1 Head and Tongue

(b) Other Diseases

Bovines	
279 Livers	Distomatosis
63 Livers	Abscesses
5 Skirts	Adhesions
3 Heads and Tongues	Cysticercus Bovis
3 Hearts	Cysticercus Bovis
3 Skirts	Cysticercus Bovis
1 Head and Tongue	Cysts
1 Lung	Cysts
2 Hearts	Cysts
2 Skirts	Cysts
1 Part Carcase	Abscesses
5 Kidneys	Nephritis
5 Livers	Adhesions
4 Heads and Tongues	Actinobacillosis
2 Hearts	Epicarditis
2 Heads and Tongues	Abscesses
1 Skirt	Abscesses
2 Kidneys	Cysts
2 Livers	Atelectasis
3 Kidneys	Hydronephritis

5	Livers	Telangiectasis
4	Udders	Mastitis
1	Liver	Parasites
1	Lung	Adhesions
2	Lungs	Pleurisy
2	Livers	Peritonitis
1	Lung	Abscesses
1	Lung	Hydatid Cysts

Pigs

2	Plucks	Septic Pneumonia
2	Kidneys	Retention Cysts
3	Plucks	Adhesions
23	Livers	Ascaris
1	Lung	Pericarditis/Pneumonia
1	Heart	Pericarditis/Pneumonia
4	Head and Tongues	Abscesses
2	Plucks	Adhesions/Ascaris
1	Part Carcase	Abscesses
2	Lungs	Pleurisy/Pericarditis
2	Hearts	Pleurisy/Pericarditis
24	Hearts	Pericarditis
2	Lungs	Adhesions
2	Hearts	Adhesions
1	Pluck	Pneumonia/Peritonitis
4	Livers	Ascaris/Adhesions
8	Lungs	Pleurisy
2	Livers	Parasites
1	Pluck	Pleurisy/Adhesions

Sheep

370	Livers	Distomatosis
10	Plucks	Distomatosis
1	Part Carcase	Emphysema
2	Livers	Abscesses
1	Pluck	Pericarditis/Abscesses
2	Livers	Distomatosis/Abscesses
2	Lungs	Parasites
39	Livers	Parasites
1	Lung	Pleurisy/Distomatosis
1	Heart	Pleurisy/Distomatosis
5	Livers	Pleurisy/Distomatosis
8	Livers	Distomatosis/Parasites
9	Livers	Adhesions

3 Lungs	Abscesses
1 Pluck	Abscesses
12 Plucks	Distomatosis/Adhesions
15 Livers	Fascioliasis
2 Plucks	Distomatosis/Abscesses
3 Kidneys	Nephritis
2 Kidneys	Retention Cysts
3 Livers	Cirrhosis
1 Pluck	Septic Pneumonia
1 Part Carcase	Septic Pneumonia
13 Livers	Ascaris
1 Part Leg	Arthritis
1 Part Carcase	Bruising
8 Livers	Peritonitis/Parasites
1 Pluck	Pleurisy/Adhesions/ Parasites
2 Legs	Bruising
2 Livers	Parasites/Cirrohsis

Total Weight of Meat Condemned 2 ton, 13 cwt., 1 qr.,
5 lbs.

Inspection of Poultry

There is one poultry processing premises operating within the area at which turkeys reared by the firm are slaughtered and dressed at one of a number of premises used by the firm for rearing purposes.

Slaughtering is carried out on a large scale and for obvious reasons, it is not possible to give adequate coverage for poultry inspection. The department however is satisfied that measures taken by the firm for the spotting and rejection of unfit birds are adequate and this has been borne out whenever an inspection of the premises and birds is carried out.

Food Condemned.

Steak Pie	1 tin	Pears	4 tins
Steak Pie	1 pkt.	Rice Pudding	6 tins
Ham	25 tins	Tomatoes	50 tins
Ham	130 tins	Beefburgers	9 pkts.
Green beans	17 tins	Steaklets	10 pkts.
Bilberries	30 tins	Sausage	16 pkts.
Beans	39 tins	Fish	8 pkts.
Apples	147 tins	Yorkshire Pudding	2
Fruit Cocktail	21 tins	Shrimps	1 pkt.

Peas	30 tins	Beef and Onions	5 tins
Peas	26 pkts.	Ham and Pork	3 tins
Trifle	1	Hens	30 lbs.
Ice cream	3 pkts.	Geese	11 lbs.
Fish Fingers	17 pkts.	Ducklings	11 lbs.
Ox Tongue	14 tins	Rabbits	48 lbs.
Pork Luncheon Meat	5 tins	Irish Stew	3 tins
Chickens	74	Steak and Veg	125 tins
Chickens	1098 lbs.	Pilchards	1 tin
Turkeys	2	Cream	2 tins
Turkeys	171 lbs.	Dairy Cream	5 cartons
Chopped Pork	61 tins	Apricots	2 tins
Grapefruit juice	6 tins	Creamed Macaroni ...	2 tins
Carrots	15 tins	Blackberries	1 tin
Potatoes	1 tin	Orange Juice	1 tin
Corned Beef	58 tins	Potato Croquettes...	14 pkts.
Steak and Kidney ...	7 tins	Plaice Fillets	8 pkts.
Plums	9 tins	Cod	6 pkts.
Smoked Haddock ...	5 pkts.	Shepherd's Pie	2 pkts.
Patty Cases	5 pkts.	Chicken Pie	1 pkt.
Sausage rolls	2 pkts.	Sliced Beef in gravy...	1 pkt.
Brussel Sprouts	1 pkt.	Hake Portions	3 pkts.
Cherries	10 tins	Kipper Fillets	5 pkts.
Grapefruit	5 tins	Broccoli spears	2 pkts.
Beetroot	6 lbs.	Raspberry Pie Filling	3 tins
Hot dog sausage	1 tin	Tomato Juice	4 tins
Tomato puree	1 tin	Cornish Pasties ...	4 pkts.
Red Currants	1 tin	Fish Cakes	24 pkts.
Mixed Veg	3 tins	Pastry	4 pkts.
Pineapple Juice	5 tins	Veg Casserole	4 tins
Tea	40 lbs.	Spaghetti	1 tin
Peaches	7 tins	Salmon	2 tins
Apricot Pulp	4 tins	Cauliflower	1 tin
Pineapples	39 tins	Bacon Grill	2 tins
Shoulder Pork	63 lbs.	Sardines	1 tin
Shoulder Pork	30 tins	Veal	63 lbs.
Stewed Steak	33 tins	Tomato Pulp	1 tin

Total weight of food condemned 2 ton, 2 cwt., 3 qrs., 25 lbs.

Inspection of Food Premises.

Details are given below of the number of each of the different types of food premises in the Borough and of the number of inspections made of them during the year.

(a) Food Premises subject to registration

	No. registered	No. of inspections
Ice Cream Producers/Retailers ...	1	1
Ice Cream Vendors	181	50
Preserved Food Preparation	56	101
Food Hawkers	73	298
Fried Fish Shops	41	137

(b) Food Premises not subject to registration

	No. in district	No. of inspections
Bakehouses	17	40
Meat Shops and Stalls	39	202
Cafes, Canteens and Restaurant kitchens	70	91
Retail Food Shops and Stalls	347	805
Total number of inspections of all food premises		1725

Food Hygiene.

The hygiene of food premises continued to receive close attention during 1968, a total of 1,725 visits being made during the year.

MAGISTERIAL PROCEEDINGS.

1. Contravention of Section 2 of the Food and Drugs Act 1955. Sale of a $\frac{1}{3}$ pint bottle of milk containing green algae, mould and grit Fined £20
2. Contravention of Section 2 of the Food and Drugs Act 1955. Sale of bickie pegs containing mould Fined £10
3. Contravention of Section 2 of the Food and Drugs Act 1955. Sale of a pint bottle of sterilised milk containing dark, granular matter Fined £20
4. Contravention of Section 2 of the Food and Drugs Act, 1955. Sale of skinless sausages containing mould Fined £5
5. Contravention of Section 16 of the Clean Air Act, 1956. Recurrence of emission of dark smoke from premises other than from a chimney, giving rise to a nuisance. Nuisance Order Obtained

6. Contravention of the Transit of Horses Order, 1951 Diseases of Animals Act, 1950. Using a vehicle for the transport of horses which was structurally unsatisfactory. Fined £5

7. Contravention of Section 11 of the Clean Air Act, 1956. Burning unauthorised fuel (coal) on a domestic grate of house in an operative Smoke Control Area ... Fined £5

8. Contravention of Section 11 of the Clean Air Act, 1956. Burning unauthorised fuel (coal) on a domestic grate of house in an operative Smoke Control Area ... Fined £5

9. Contravention of Section 11 of the Clean Air Act, 1956. Burning unauthorised fuel (coal) on a domestic grate of house in an operative Smoke Control Area ... Fined £5

10. Contravention of Section 11 of the Clean Air Act, 1956. Burning unauthorised fuel (coal) on a domestic grate of house in an operative Smoke Control Area ... Fined £5

11. Contravention of Section 11 of the Clean Air Act. 1956. Burning unauthorised fuel (coal) on a domestic grate of house in an operative Smoke Control Area ... Fined £5

12. Contravention of Section 11 of the Clean Air Act, 1956. Burning unauthorised fuel (coal) on a domestic grate of house in an operative Smoke Control Area ... Fined £10

13. Contravention of Section 27 (adoptive) of the West Riding County Council (General Powers) Act, 1964. Emission of dark smoke, other than smoke from a chimney from industrial premises, by the burning of cars in the open at a wrecker's yard. Fined £10

14. Contravention of Food Hygiene Regulations 1960:—	
(a) dirty floor, doors and ceiling of refrigeration room in a meat preparing premises.	Fined £8
(b) defective walls, door and ceiling of the refrigeration room in a meat preparing premises	Fined £5
(c) accumulation of refuse in the refrigeration room of a meat preparing premises	Fined £5
(d) dirty and defective condition of a table in the refrigeration room of a meat preparing premises	Fined £5
(e) dirty cleaver in the refrigeration room of a meat preparing premises	Fined £5

